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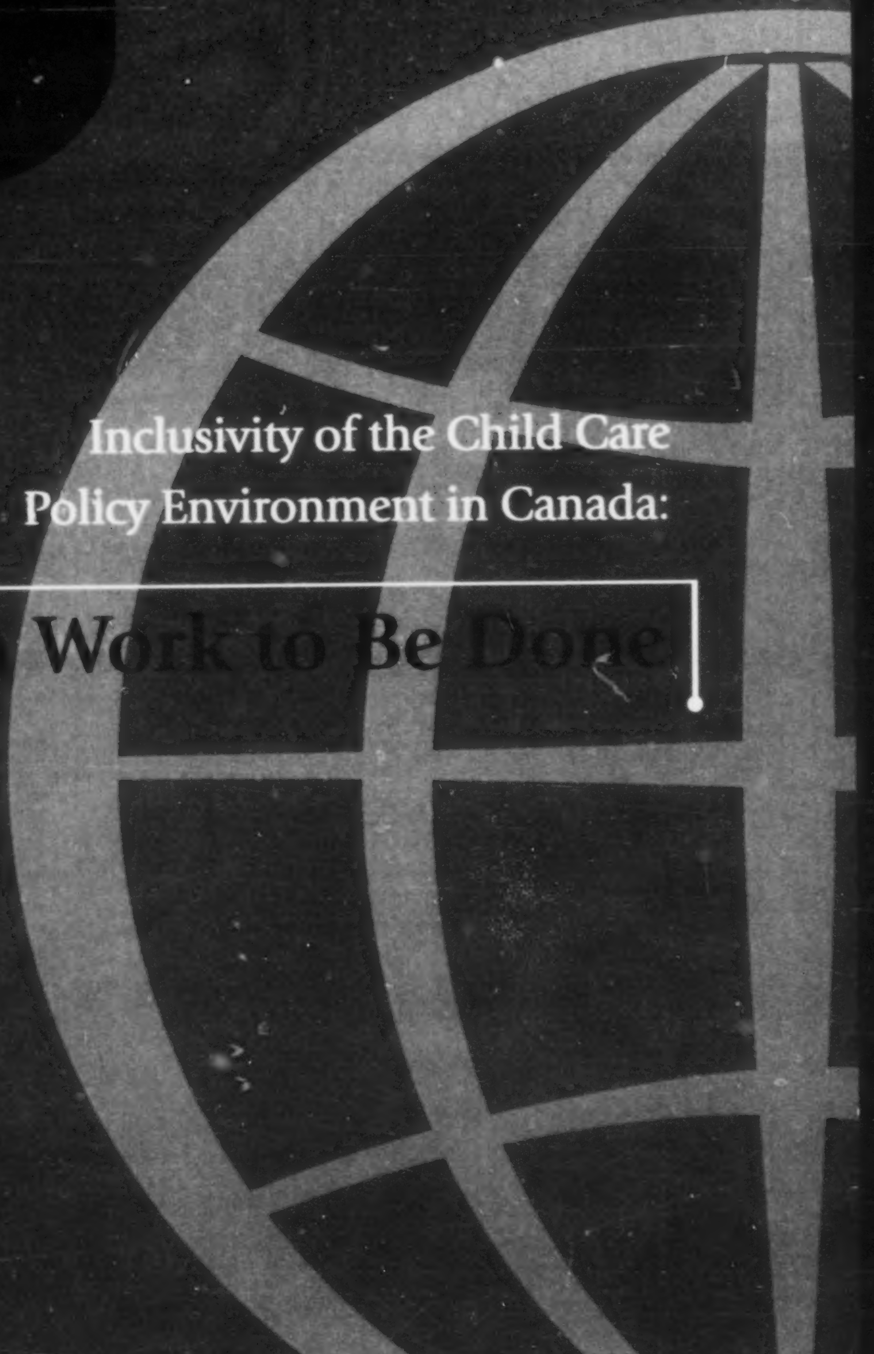

Inclusivity of the Child Care Policy Environment in Canada:

Much Work to Be Done

L'Institut Roeher Institute

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L'Institut Roeher Institute
July, 2003

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Executive Summary

This report focuses on research conducted by *The Roeher Institute* for *SpeciaLink*[1], to examine child care policies in Canada and the extent to which they support the inclusion of children with disabilities in child care programs. The research highlights a very troubling scenario. Across the country, the healthy development of many of Canada's children, and not just children with disabilities, is put at risk because of inadequate policy, funding and programming for child care.

The child care sector in Canada is underdeveloped and underfunded. Licensed child care programs meet just 10 percent of the need for child care spaces. Children with disabilities often are not welcomed into programs either because of resourcing issues or because of underlying misunderstandings about disability and/or overt discrimination.

Lack of inclusive child care programs adds yet another layer of disadvantage to children with disabilities and their parents. While inclusive child care policies will not in and of themselves translate into inclusive child care, they will help to establish the ground rules, set standards and provide the needed funding base for the development of inclusive, high-quality child care.

In the absence of a systematic method for benchmarking inclusion in child care policies, the objectives of this research were to:

- Identify and critically examine methods of benchmarking the level of inclusiveness in child care programs and services, beyond those developed by *SpeciaLink*, that could inform the development of inclusive child care policy benchmarking instruments;
- Develop and test an instrument for benchmarking the inclusivity of child care policies;
- Evaluate existing child care policies across the country using the benchmarking instrument; and
- Identify policy directions.

The first component of the research was a literature review. Its purpose was to identify existing measurement tools for early childhood inclusion, other than those developed by *SpeciaLink* for assessing the inclusivity of child care practices[2], that could inform the development of policy benchmarks. The review revealed a major gap between the two prominent types of tools. On the one side, the *Early Childhood Environment Rating Scale – Revised* (ECERS-R) and the *Early Childhood Special Education Program Design and Development Guide* (EC-SPEED) are scientifically solid, but extremely detailed and labour intensive. On the other side, are tests such as most of those outlined in this review that are often plagued by unclear questions, murky constructs and a lack of assurance of validity and reliability.

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[1] *SpeciaLink:* The National Centre for Child Care Inclusion is a non-profit organization located in Sydney, Nova Scotia, headed by Sharon Hope Irwin.

[2] These include: *Benchmarks for Child Care Inclusion in Canada; SpeciaLink Inclusion Principles Checklist* and *SpeciaLink Child Care Inclusion Profile.*

The tests outlined in the review fill a need regarding inclusion; however, they fall far short of filling it completely. Some are able to provide instruction on what makes a program inclusive, but none of them is able to definitively demonstrate that the inclusive practices they recommend actually result in real, measurable inclusive outcomes.

Following the review, an instrument was developed to measure the inclusivity of the child care policy environment. The instrument is essentially a set of benchmarks for inclusive child care policy that draws on instruments used elsewhere and on evidence collected over the years by *The Roeher Institute* and *SpeciaLink* about co-requisites for inclusion. (See Appendix A for a copy of the instrument.) The intent was to ascertain the policy framework currently in place and the extent to which it is inclusive of all children.

The instrument measures and scores a number of different policy elements identifying areas of strength or weakness in a given policy environment. Provincial/territorial ministerial officials responsible for early childhood development and care were interviewed using the inclusion instrument. Officials were asked questions about their policy environment and invited to participate in the scoring of their policies according to the provided rating scale. Interviews with child care specialists across the country were also conducted using the inclusion instrument. They were also asked questions about the policy environment in which they worked and were invited to comment on the rating provided by ministry officials.

The comments provided by the child care specialists typically highlight the lack of connection between policy and practice. A fully inclusive policy environment does not necessarily lead to fully inclusive child care practices. For example, if in any given jurisdiction there is only one child care space for every ten children requiring care and nine out of ten of those spaces are in private family child care centres not governed by provincial/territorial policy, an inclusive policy environment will have little effect on overall inclusion and the elimination of wait lists for services.

These comments also highlight the importance of carrying out the policy benchmarking in conjunction with program benchmarking using instruments such as the *SpeciaLink Child Care Inclusion Profile* and *SpeciaLink Child Care Inclusion Principles Checklist.*

Using the policy benchmarking instrument, policy environments across the country were assessed according to six major co-requisites for inclusion: 1) Participation of Children with Disabilities in Child Care Programs; 2) Environmental Accommodations; 3) Parent/Family Participation; 4) Program Accommodations; 5) Staff; and 6) Services.

For each of these six elements, provincial/territorial officials and child care experts across the country were asked a set of questions to assess how well each of these co-requisites is reflected and supported by the following: 1) Policy/Program Philosophy re: Inclusion; 2) Legislation; 3) Regulations; 4) Standards and Guidelines; 5) Program Requirements; 6) Budgetary Measures; and 7) Monitoring and Evaluation Frameworks.

The set of summary scores for each province/territory demonstrates the overall need for improvements in the inclusivity of the child care policy environment in Canada. (See Table 1.) (Summary tables for each jurisdiction have been included in Appendix D.) While it would appear that some jurisdictions are on the road to an inclusive policy environment, it is clear that much work is needed across the country.

In several cases, excellent policy environments [higher than 87 percent] were identified for one or more of the co-requisites for inclusion, highlighted in Table 2. The policy environment in these areas should be further studied as potential best practice models. Province 2, for example is the only jurisdiction with legislation supporting a "zero reject" policy, while Province 3 has exemplary policies regarding the provision of specialized disability-related supports and services to children within child care settings. Province 6, Province 3 and Province 8 also stand out with regard to their policies governing environmental accommodations.

For the most part, the inclusivity of the child care policy environment in Canada is less supported by an underlying philosophy of inclusion, legislation, regulations and standards and guidelines, than by programmatic

Table 1. Overall Rating of Inclusivity of Policy Environment

Province/ Territory	Overall Ranking	Score	Percent of Max. Score	Scoring Guide
Province 1	1	122	73%	Adequate to good policy environment [68% - 87%]
Province 2	2	117	70%	Adequate to good policy environment [68% - 87%]
Province 3	2	117	70%	Adequate to good policy environment [68% - 87%]
Province 4	3	112	67%	Poor to barely adequate policy environment [50% - 67%]
Province 5	4	107	64%	Poor to barely adequate policy environment [50% - 67%]
Province 6	5	106	63%	Poor to barely adequate policy environment [50% - 67%]
Province 7	6	102	61%	Poor to barely adequate policy environment [50% - 67%]
Province 8	7	101	60%	Poor to barely adequate policy environment [50% - 67%]
Province 9	8	84	50%	Poor to barely adequate policy environment [50% - 67%]
Province 10	9	76	45%	Unacceptable policy environment [less than 50%]
Maximum Score		168	100%	Excellent policy environment [higher than 87%]

Table 2. Key Co-Requisites for Inclusion

Province/ Territory	Participation of Children with Disabilities in Child Care Programs	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services
Province 1	79%	79%	64%	64%	71%	79%
Province 2	89%	57%	82%	57%	54%	79%
Province 3	46%	93%	82%	54%	43%	100%
Province 4	61%	68%	86%	46%	57%	82%
Province 5	64%	71%	75%	61%	43%	64%
Province 6	57%	96%	57%	61%	39%	71%
Province 7	68%	50%	57%	64%	54%	71%
Province 8	46%	89%	71%	46%	46%	61%
Province 9	50%	75%	57%	46%	29%	43%
Province 10	39%	46%	54%	39%	43%	50%

requirements, budgetary measures and monitoring systems. Table 3 details the summary of scores in each of these areas across the country, highlighting exemplary policy environments that should be further examined as potential best practice models.

Table 3. Legislative, Policy and Budgetary Support for Inclusion

Province/ Territory	Philosophy of Inclusion	Legislation	Program Requirements	Budgetary Measures	Monitoring Framework	Regulations	Standards & Guidelines
Province 1	58%	50%	38%	83%	92%	88%	96%
Province 2	63%	63%	50%	63%	100%	75%	75%
Province 3	75%	63%	63%	58%	92%	67%	71%
Province 4	75%	38%	58%	75%	67%	67%	88%
Province 5	38%	25%	33%	71%	92%	83%	100%
Province 6	71%	38%	38%	67%	79%	75%	79%
Province 7	63%	29%	50%	38%	92%	75%	79%
Province 8	58%	54%	50%	54%	75%	63%	67%
Province 9	67%	38%	25%	42%	71%	63%	46%
Province 10	46%	25%	25%	46%	71%	54%	50%

Research respondents raised many key policy issues related to understandings about the importance of child care for the healthy development of children, the quality of care, the lack of environmental and program accommodations in centres — particularly, in their outdoor play spaces — the extent to which parents are involved and participate in decision-making about their child's care, the fragmented and inadequate system of disability-related supports and the services necessary to ensure the full inclusion of children with disabilities in child care.

Given these underlying issues, there are tremendous challenges ahead on the policy front. As this report demonstrates, this is particularly the case around issues of inclusion for children with disabilities.

I. Introduction

This report focuses on research conducted by *The Roeher Institute* for *SpeciaLink*[3], to examine child care policies in Canada and to construct and test a methodology for benchmarking the extent to which policy environments across Canada support the inclusion of children with disabilities in child care programs. The research highlights a very troubling scenario. Across the country, the healthy development of many of Canada's children, and not just children with disabilities, is put at risk because of inadequate policy, funding and programming for child care.

What has given rise to the current state of child care in Canada?

On the one hand, there is recognition that child poverty is a key risk factor for poor child development and that child poverty and parental unemployment go hand in hand in Canada. There is also broad recognition of the need for investment in early childhood development (McCain and Mustard 1999; Doherty 1997; Tipper and Avard 1999; Atkinson Charitable Foundation 1999; Feldman and Minnes 1999; Irwin, Lero, and Brophy 2000; Janus and Offord 2000; Kolucki 2000; Jenson and Stroik 1999; Hertzman 2000; Human Resources Development Canada 1999; Wilkins, Houle, Berthelot, and Ross 2000).

This recognition led to the creation of the *National Children's Agenda* (NCA) and the *Early Childhood Development Initiative* (ECDI), two key federal-provincial/territorial strategic initiatives to advance a public policy agenda to promote healthy child development. As stated in the Speech from the Throne, September 23, 1997:

> *The federal, provincial and territorial governments agreed in January 1997 to work together to develop the* National Children's Agenda, *a comprehensive strategy to improve the well-being of Canada's children.*
>
> *Federal, provincial and territorial governments will work together to develop this broader agenda for children, including clear outcome measures by which to gauge success. As part of this national agenda, the federal government will ... measure and report regularly on the readiness of Canadian children to learn, so that we can assess our progress in providing our children with the best possible start.*

The case for investments is built on a vision for the children of Canada laid out in the National Children's Agenda:

- *We want all of our children to be loved and to thrive.*

---

[3] *SpeciaLink: The National Centre for Child Care Inclusion* is a non-profit organization located in Sydney, Nova Scotia, headed by Sharon Hope Irwin.

- *We want every child to be valued and to develop his or her unique physical, emotional, intellectual, spiritual and creative capacities.*
- *We want every child to be respected and protected, and in turn, to respect and protect the rights of others.*
- *We want all of our children to belong and contribute to communities that appreciate diversity, support different abilities and share their resources.*

On the other hand, there is an underlying presumption that child care is the private responsibility of parents, typically mothers. There is also an underlying bias that devalues the caring work of women. These have translated into a lack of commitment toward the public provision of child care and to the underdevelopment of policy and policy instruments across the country. It has also resulted in inadequate funding for quality child care, leading to a shortage of licensed child care spaces, under-resourcing of existing child care programs and low wages in the sector, making it difficult to train, attract and retain high-quality staff.

The child care sector in Canada is underdeveloped and underfunded. Licensed child care programs meet just 10 percent of the need for child care spaces. Children with disabilities are often not welcomed into programs either because of resourcing issues or because of underlying misunderstandings about disability and/or overt discrimination. Given these underlying issues, there are tremendous challenges ahead on the policy front. As this report demonstrates, this is particularly the case around issues of inclusion for children with disabilities.

If parents are to fully participate in education and employment, they need to know that their children are well taken care of and are developing to their fullest potential. Without access to affordable, high-quality child care, parents' ability to work and to go to school is inhibited, and family economic security is endangered.

For working parents who make use of available child care, the development of their children is at stake. Shortages of licensed child care spaces, poor-quality child care programs, under-qualified staff, and high staff turnover seriously jeopardize their development from an early age.

Lack of inclusive child care programs adds yet another layer of disadvantage to children with disabilities and their parents. While inclusive child care policies will not in and of themselves translate into inclusive child care, they will help to establish the ground rules, set standards and provide the needed funding base for the development of inclusive, high-quality child care.

Recent developments on the policy front offer a ray of hope. In some regions, investments made under the ECDI have been used to enhance the child care environment. The federal budget announced in February 2003, made a commitment to addressing child care issues. In March 2003, Federal/Provincial/ Territorial Ministers Responsible for Social Services launched a Multilateral Framework for Early Learning and Child Care. This framework for improving access to affordable, quality-regulated child care is to be guided by the principles of availability, accessibility, affordability, quality, inclusivity and parental choice.

This report helps to guide the way to a new policy environment for inclusive child care in Canada. Using a set of inclusion benchmarks developed and tested as part of the research for this project, the report maps the current child care policy environment in provincial and territorial jurisdictions across Canada, provides a set of scores that reflect the degree of inclusion in the childcare policy environment in each jurisdiction, identifies key policy issues and points to needed policy responses. The report leaves little doubt, that there is much work to be done.

II. Research Objectives, Activities and Methodology

Research Objectives

In the absence of a systematic method for benchmarking inclusion in child care policies, the objectives of this research were to:

- Identify and critically examine methods of benchmarking the level of inclusiveness in child care programs and services, beyond those developed by SpeciaLink, that could inform the development of inclusive child care policy benchmarking instruments;
- Develop and test an instrument for benchmarking the inclusivity of child care policies;
- Evaluate existing child care policies across the country using the benchmarking instrument; and
- Identify policy directions.

Research Activities and Methodology

The research activities and methodology included:

- A literature review of existing measurement tools used for early childhood policy and program evaluation.
- Development of an instrument to measure the inclusivity of the child care policy environment. The instrument is essentially a set of benchmarks for inclusive child care policy that draws on instruments used elsewhere and on evidence collected over the years by The Roeher Institute and SpeciaLink about co-requisites for inclusion. (See Appendix A for a copy of the instrument.) The intent was to ascertain the policy framework currently in place and the extent to which it is inclusive of all children.

  The instrument can be administered on a periodic basis so that progress toward inclusion can be monitored and evaluated over time. As well, the instrument measures and scores a number of different policy elements identifying areas of strength or weakness in a given policy environment. In this way, areas of weakness can be targeted for improvements, and results monitored over time.

- Interviews with provincial/territorial ministerial officials responsible for early childhood development and care using the inclusion instrument. Using the instrument, officials from all jurisdictions but Quebec, The Northwest Territories and Nunavut were asked questions about their policy environment and invited to participate in the scoring of their policies according to the provided rating scale. Officials were given copies of the completed instrument and asked to verify their scores.

- Interviews with child care specialists across the country using the inclusion instrument[4]. Child care specialists were also asked questions about the policy environment in which they worked and were invited to comment on the rating provided by ministry officials.
- Attribution of scores. Given sensitivities concerning cross-jurisdictional comparisons of child care policies, inclusion scores are not attributed to individual provinces and territories by name. Provinces/Territories were ranked from one to ten, according to the overall inclusion score their child care policy environment received in the benchmarking exercise. Each jurisdiction was then assigned a label reflecting that rank. Thus, the jurisdiction with the highest overall inclusion score is referred to as Province 1 throughout the report, the second highest ranking jurisdiction as Province 2, and so on. As it turned out, Provinces 1 through 10 are randomly distributed across the country, so no geographic order should be presumed.
- Analysis of results.

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[4] Thanks are due here to Martha Friendly, Director of the Child Care Resources and Research Unit, University of Toronto for supplying contact information for potential informants and for pre-publication data from her book, *Early Childhood Education and Care in Canada 2001*.

III. Literature Review: Identification of Existing Measurement Tools for Policy and Program Evaluation

Introduction

The objective of the literature review was to scope out existing measurement tools for early childhood policy and program evaluation that could be drawn upon in an exercise to construct an instrument for benchmarking the inclusivity of child care policy. Its purpose was to identify measurement tools for early childhood inclusion — other than the instruments developed by SpeciaLink for assessing the inclusivity of child care practices[5] — that could inform the development of policy benchmarks. The literature review revealed few meaningful instruments beyond those developed by SpeciaLink. Indeed, the words "assessment", "evaluation", "indicators", "outcomes" and "monitoring" came up often, but most frequently with regard to children rather than programs. While the science of child assessment is well-developed and widespread, programs such as early intervention, early childhood education and child care are much less likely to undergo rigorous testing themselves. Hence, the relative lack of tests such as the Revised Early Childhood Environment Rating Scale (ECERS-R), often cited as the scale-of-choice for internal program monitoring and evaluation.

Tests for the purpose of program evaluation are, for the most part, constructed as easily completed forms that are not normed or tested for inter-rater reliability or external validity. This is likely a result of time and funding issues that make extensive testing of such programs difficult. While such tests are useful to directors and service providers interested in making their programs inclusive, it makes comparison of programs and the assessment of the degree of inclusion impossible.

This review focuses on tests that deal with the inclusion of children with disabilities in out-of-home child care and educational settings. While some deal exclusively with integration, others include disability-related factors as only one part of a larger evaluation regime (if it can be called that). The review is a supplement to the discussion provided within the proposal *Benchmarks for the Inclusion of Children with Special Needs in Early Childhood Development Policy and Practice in Canada* (May 1, 2001), and as such will not examine tests and evaluation tools outlined in that document. Instead, it will outline additional tests that have been uncovered through searches of the following resources:

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[5] These include: *Benchmarks for Child Care Inclusion in Canada; SpeciaLink Inclusion Principles Checklist* and *SpeciaLink Child Care Inclusion Profile.*

- Web sites of child care, early child development and early childhood education programs and support/knowledge agencies in Canada, the United States, the United Kingdom and Australia
- Computer databases including ERIC, the Canadian Education Directory, CBCA Fulltext Education, Education Index, Wilson Social Science Abstracts, Sociological Abstracts and Social Sciences Abstracts
- Manual searches of *The Roeher Institute* and York University Libraries.

Findings

In Chapter 5 of Smith and Rose (1993), entitled "Identifying Your Policy Barriers and Options for Preschool Mainstreaming", the authors present information focused on conforming to legislation and enforced mainstreaming, for example, in response to the Individuals with Disabilities Education Act, (IDEA). It outlines methods of analyzing, responding to and changing policies to effect preschool inclusion. Five steps are outlined in this process, including:

1. Which barriers to address
2. Which options to try
3. Strategies to employ in implementing options
4. Designating responsibility for each strategy
5. Time frame and outcome for each activity.

Forms are provided to facilitate the formation of an "Individualized Policy Action Plan". Those completing the forms outline each relevant policy, the level and type of that policy, why the policy is a barrier and, finally, policy options and areas for action.

Appendix 5 of Smith and Rose (1993) contains the *Checklist for Developmentally Appropriate Integrated Settings for Early Childhood,* taken from a 1990 document from the Massachusetts Department of Education. Twenty-six items are provided. They focus on issues such as physical space and furniture layout, alternative communication and environmental cues, noise absorption, predictability and timing of daily routine, social and emotional development, real participation of children with disabilities, accommodation of individual needs, cognizance of the possible need for behavioural cues and reminders, among others. As with the majority of tests outlined in this review, the items are not normed or tested for inter-rater reliability or external validity. Many of the questions contain multiple constructs that, while easily placed under a common heading (e.g. "physical space", "opportunities for physical development", "normalization of routines"), may create some confusion. For example, item #1 reads:

> *Classroom space, doorways, bathrooms and sinks as well as outdoor play space are accessible and allow children who need a variety of adaptive equipment (wheelchairs, walkers, etc.) to participate in activities without being restricted.*

This item contains many distinct constructs that would need to be expanded into separate items to increase the internal validity of the test. For example, "classroom space" and "bathrooms" are too broad as constructs to be conducive to accurate measurement. These broad constructs would be better broken down into a number of discrete elements such as unobstructed floor space, accessibility and arrangement of furniture, lighting etc., which would be more conducive to measurement. Items such as doorways, sinks, outdoor play space etc. would be more effectively placed as separate items to facilitate a more detailed analysis and comparison of program spaces.

Davern et al. (1992) have produced a checklist focused on team performance in relation to the provision of an inclusive atmosphere. It provides criteria that indicate "areas of strength", "areas for further development", and "ideas for making progress on priority items". The list is organized into six main sections:

1. Holding a shared philosophy
2. Establishing effective communication patterns
3. Maintaining positive attitudes towards teamwork and team members
4. Clarifying roles and responsibilities
5. Maximizing effectiveness
6. Using a collaborative problem-solving process.

Unfortunately, this checklist is plagued by the same problems as the test outlined in Smith and Rose (1993). While it could potentially serve as a valuable guide for service providers in early childhood services, the questions contained within the test are highly subject to individual interpretation, and use terms such as "shared philosophy", "full inclusion", "problematic behaviours", "clear consensus", etc. These are terms that require further elaboration, clarity and distinctness to be properly measured.

Several related checklists also can be found at the Web site of the organization *Circle of Inclusion* (www.circleofinclusion.org), administered through the University of Kansas. These include:

- Classroom Checklist for Teachers
- Classroom Environment Assessment
- Evaluation of Early Intervention Transition Practices Checklist
- Engagement Checklist
- Team Meeting Checklist / Team Member Checklist
- Personnel Preparation Checklist
- Inclusion Observation Checklist
- Family-Centred Program Rating Scale – Parent's Scale.

These checklists are organized under an ideology of program evaluation that appears to understand the necessity of both "formative" and "summative" evaluations — those that assess ongoing progress as well as those that assess outcomes. The *Circle of Inclusion* evaluations include child, program, personnel and administrative monitoring that could be used to effectively split a time-consuming process into smaller, manageable units.

The *Engagement Checklist* is particularly relevant, measuring the interaction between a child with special needs and her or his environment (physical space, peers, teachers, guardians etc.). The list is short, but contains questions that are easily expanded into greater detail. The questions are, for the most part, based on a self-anchored approach to child assessment. There are a few exceptions where normative indicators, such as age-appropriateness, are used.

The Tennessee Department of Human Services supplies another rating scale entitled *Star-Quality Child Care Program Report Card for Child Care Centres.* This report card has seven rating categories:

1. Director Qualifications
2. Professional Development
3. Compliance History
4. Parent/Family Involvement
5. Ratio and Group Size
6. Staff Compensation
7. Program Assessment.

The report classifies child care programs into four categories — those that meet the minimum standard, and those that merit "one-star", "two-star", or "three-star" ratings. There are 19 measurement items included in the "three-star" rating, none of which specifically relate to the accommodation of children with disabilities. However, the sections on "Director Qualifications" and "Professional Development" require staff to be trained in programs that presumably deal specifically with the provision of services to children with special needs. The same categories within the "two-star" section require directors to have "30 hours of pre-service orientation training, including age-specific training, inclusion of children with special needs and business/management administration." To merit a "two-star" rating, 25 percent of staff are required to have "three years of experience in early care and/or education and 30 hours of training through TECTA Orientation, a Tennessee Technology Centre, or, as recognized by the Department, equivalent training on a standard curriculum specific to age group/setting which includes working with children with special needs, or documented enrolment therein".

The National Early Childhood Technical Assistance Program (at the Frank Porter Graham Child Development Institute, University of North Carolina at Chapel Hill) has produced several surveys specific to agencies providing services to children with autism. Included are surveys of both service providers[6] and policy makers.[7] Also available is the *Early Identification of Young Children with Autism/*ASD survey.[8] It monitors and evaluates the state and program apparatus surrounding early identification (the form is split into three sections: State Challenges, State Strategies and State Needs), but is not a form for child assessment. While these surveys seem to be designed for collection of information by external bodies, they could also be useful as internal monitors of professional agencies' engagement with their clients, and as an analysis of needs in relation to government funding bodies. The forms measure such issues as training materials used, technical assistance provided to staff, strategies and approaches used in interventions, degree of contact between service providers and state-run agencies and government departments, inclusion of parents in program design and day-to-day activities, and provision of services to the family unit rather than to individual children. The surveys use Likert-type scales and some written question-answer forms that are easily completed in a short period of time. It does not appear that the tests have been normed for validity or reliability, and the nature of many of the questions could very well make this impossible.

The Centre for Excellence in Developmental Disabilities Education, Research, and Service at the Rural Institute of the University of Montana has produced the *Child Care plus+ Curriculum on Inclusion*, which provides a number of checklists, action plans and self-assessments to monitor inclusion of children with disabilities in child care. The guide focuses on:

- Health and safety
- Arrangement of the learning environment
- Proper and creative use of toys
- Guiding behaviour
- Facilitating communication.

The guide also addresses more general issues around accessibility, parental involvement/partnership and team/group function. Checklists include the *What's My Attitude Survey*, *Inclusion Policies and Practices Self-Assessment for Early Childhood Programs*, and *Inclusion Skills Self-Assessment for Early Childhood Professionals*.

The Consortium on Inclusive Schooling Practices (1996) has proposed a number of questions measuring state and regional commitment to school inclusion that could be translated to the early childhood policy and program environment. The questions address issues in six areas:

- Curriculum

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[6] Available at www.ectac.org/eval/pdfs/AUTISMsurvey.pdf.

[7] Available at www.ectac.org/eval/pdfs/policysurvey.pdf.

[8] Available at www.nectas.unc.edu/eval/pdfs/earlyidsurvey.pdf.

- Assessment
- Accountability
- Personnel training and development
- Funding
- Governance.

Each section asks questions to analyze policy from a top-down and bottom-up approach. For example, a state-level curriculum question asks, "does the state provide model curriculum frameworks or examples and curriculum adaptations, based on the same standards that could be used with students with significant disabilities?" In the same section, a district-level question asks, "Are parents and other community members aware of the curriculum and are they actively involved in the development and review of curriculum in the district?"

Child Development Resources[9] has produced the *Benchmarks Needs Assessment Instrument*, which contains six separate tools that help agencies to accommodate children with disabilities in natural settings. These six tools are meant to be applicable to parents, child care and early intervention programs and early childhood teachers. They are available for:

- Collaborative practices
- Learning activities
- Administrative practices
- Environment/setting
- Family-centred practices
- Summary of needs assessment.

Each of these tools (with the exception of the *Needs Assessment Summary*) contains items listed on a four-point scale ("a lot of need"; "some need"; " a little need"; "not a need"). The forms allow personnel to learn what is necessary to facilitate inclusive practice while helping to identify areas of strength and need in a particular program. They do not measure inclusiveness of particular programs, i.e. the presence of certain criteria that indicate where a program falls on a scale of inclusiveness. They give a general idea of what is needed to make a program inclusive, but are not able to measure outcomes based on meeting an identified set of criteria.

Discussion

The review of existing measurement tools for early childhood inclusion, revealed a major gap between the two prominent types of tools. On the one side, the *Early Childhood Environment Rating Scale – Revised* (ECERS-R) and the *Early Childhood Special Education Program Design and Development Guide* (EC-SPEED) are scientifically solid, but extremely detailed and labour intensive. On the other side, are the tests such as most of those outlined in this review that are often plagued by unclear questions, murky constructs and a lack of assurance of validity and reliability.

The tests outlined in this review fill a need regarding inclusion; however, they fall far short of filling it completely. Some are able to provide instruction on what makes a program inclusive, but none of them is able to definitively demonstrate that the inclusive practices they recommend actually result in real, measurable inclusive outcomes. For this to be the case, the tests would need to be subjected to rigorous testing and, presumably, revision. Only then would it be possible to establish a causal link between so-called inclusive practice and actual inclusion as lived experience.

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[9] Available at www.cdr.org.

In contrast, the *SpeciaLink Child Care Inclusion Profile* and *SpeciaLink Child Care Inclusion Principles Checklist,* two Canadian instruments developed and rigorously tested across Canada by *SpeciaLink*, are effective, simple-to-administer instruments that measure child care inclusion quality in practice. These instruments were informed by ECERS-R and other instruments covered in the literature review and by years of practical experience identifying and trying out successful strategies for inclusion in child care settings.

SpeciaLink's work in this area also identified a gap in instruments to measure the inclusivity of the policy environment. The literature review confirmed this gap and the need for developmental work on an instrument for assessing the inclusivity of policy governing child care.

Given this gap, *SpeciaLink* commissioned *The Roeher Institute* to construct and begin testing an instrument to assess the inclusivity of child care policy. The remainder of this report is dedicated to the results of that work.

IV. Overview of the Child Care Policy Environment in Canada

Introduction

While inclusive policies in and of themselves will not necessarily lead to inclusive practices, a robust inclusive policy environment lays the foundation for inclusive child care practices. Nonetheless, not everyone interviewed as part of the research agreed that policy/legislation was desirable. In particular, one government official argued that it was better to protect programs by fostering high community expectations rather than to create policies that successive governments could easily change. Another representative stated that their approach was to facilitate and support rather than dictate inclusion, while another stated bluntly that not all their child care centres were appropriate places for children with special needs.

This issue has been addressed to some degree in the literature. Utting (1998) suggested that good practice should be protected against political change by seeking cross-party support and an accompanying long-term commitment to funding.

Smith and Rapport (2001) explored the value of policy. While acknowledging that in the United States, the Americans with Disabilities Act (ADA) has not resulted in a significant increase in inclusion in child care centres, they nonetheless concluded that policy that promotes inclusion is necessary:

> *It seems that public policy alone may not be sufficient for promoting inclusive practices. However, given that policy establishes goals and determines the use of public resources, it is probably necessary. Indeed, policy could be viewed as the floor of possibilities upon which a structure can be built by actions that change attitudes and beliefs, that promote better understanding among stakeholders, including parents, schools, child care providers, health providers, and payers, and that increase resources — both fiscal and human. Policies can facilitate improvements in the non-policy-related factors such as personnel skills.*

From their point of view, a shift towards inclusion requires a comprehensive approach with policy as the underpinning.

Policy can lay a foundation and policy can foster systems change, but training, information, peer support experience, collaborative planning and other skill- and trust-building strategies can foster the personal change needed for supportive attitudes and values necessary for effective inclusion practices.

Neither the federal government nor individual provincial and territorial governments in Canada have the equivalent of the Americans with Disabilities Act (ADA), explicitly prohibiting the exclusion of children with disabilities from child care programs. However, in theory at least, it could be argued that the *Canadian Charter of Rights and Freedoms,* and provincial human rights legislation should apply to child care centres.[10] Interestingly, only one government informant said that they told centres that it was against the law to exclude children with disabilities, and even then, the informant was unsure of the legal footing. Certainly explicit legislation would dispel the apparent confusion about this issue and, as Smith and Rapport have suggested, lay the foundation for widespread inclusion. In the meantime, in too many parts of the country it seems that parents with children with disabilities who need child care are dependent on the largesse of their government or the individual centre.

Key Findings

Using the instrument provided in Appendix A, provincial/territorial child care policy environments were examined on many dimensions of inclusion, and rated according to how well they met the identified criteria for inclusivity. These criteria were adopted based on knowledge about co-requisites for inclusion that *The Roeher Institute* has gained over the years from its research and that of others, like Sharon Hope Irwin at *SpeciaLink.*

Policy environments were assessed according to six major co-requisites for inclusion: 1) Participation of Children with Disabilities in Child Care Programs; 2) Environmental Accommodations; 3) Parent/Family Participation; 4) Program Accommodations; 5) Staff; and 6) Services.

For each of these six elements, provincial/territorial officials and child care experts across the country were asked a set of questions to assess how well each of these co-requisites is reflected and supported by the following: 1) Policy/Program Philosophy re: Inclusion; 2) Legislation; 3) Regulations; 4) Standards and Guidelines; 5) Program Requirements; 6) Budgetary Measures; and 7) Monitoring and Evaluation Frameworks.

Scores were assigned based on the information provided by the experts and officials, rating ECD policies on a scale of 1 to 4, according to how well they reflect the principles of inclusion and meet the needs of children and their families. Scores were tallied up and the various elements of the policy environment were rated individually and then as a whole.

The scores provide a benchmark of the inclusivity of the child care policy environment before the *Multilateral Framework on Early Learning and Child Care* is rolled out, highlighting strengths, key areas for improving the policy environment across the country and where investments might best be made. In some cases, there was disagreement between the scores assigned by ministry officials and the opinion of experts in the field. This highlights the discrepancy that often exists between policy and practice and the need to conduct benchmarking of both policies, programs and practice. The policy benchmarking exercise could be repeated at regular intervals to update information and to measure what has changed or developed in the interim. Over time, the information gained from this exercise can be used to fine-tune investments in child care and to monitor the success of the new Federal-Provincial/Territorial Early Learning and Child Care initiative. With the scores in hand, families, child care providers and policy analysts also should be better prepared to advocate for better child care policies and for a shift in investments accordingly.

Overall Rating of the Inclusivity of the Child Care Policy Environment in Canada

The set of summary scores for each province/territory demonstrates the overall need for improvements in the inclusivity of the child care policy environment in Canada. (See Table 1.) (Summary tables for each jurisdiction have been included in Appendix D.) While it would appear that some jurisdictions are on the road to an inclusive policy environment, it is clear that much work is needed across the country.

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[10] As with exceptions to other forms of discrimination, the centre would have to demonstrate "undue hardship" in order to exclude a child with special needs. The Ontario Human Rights Commission has undertaken hearings with regard to the treatment of children with special needs by the education system. It would seem the argument that they have used to justify their jurisdiction in this area could easily be applied to child care.

Table 1. Overall Rating of Inclusivity of Policy Environment

Province/ Territory	Overall Ranking	Score	% of Maximum Score	Scoring Guide
Province 1	1	122	73%	Adequate to good policy environment [68% - 87%]
Province 2	2	117	70%	Adequate to good policy environment [68% - 87%]
Province 3	2	117	70%	Adequate to good policy environment [68% - 87%]
Province 4	3	112	67%	Poor to barely adequate policy environment [50% - 67%]
Province 5	4	107	64%	Poor to barely adequate policy environment [50% - 67%]
Province 6	5	106	63%	Poor to barely adequate policy environment [50% - 67%]
Province 7	6	102	61%	Poor to barely adequate policy environment [50% - 67%]
Province 8	7	101	60%	Poor to barely adequate policy environment [50% - 67%]
Province 9	8	84	50%	Poor to barely adequate policy environment [50% - 67%]
Province 10	9	76	45%	Unacceptable policy environment [less than 50%]
Maximum Score		168	100%	Excellent policy environment [higher than 87%]

In several cases, excellent policy environments [higher than 87 percent] were identified for one or more of the co-requisites for inclusion highlighted in Table 2, below. The policy environment in these areas should be further studied as potential best practice models. Province 2, for example is the only jurisdiction with legislation supporting a "zero reject" policy, while Province 3 has exemplary policies regarding the provision of specialized disability-related supports and services to children within child care settings. Province 6, Province 3 and Province 8 also stand out with regard to their policies governing environmental accommodations.

Table 2. Key Co-Requisites for Inclusion

Province/ Territory	Participation of Children	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services
Province 1	79%	79%	64%	64%	71%	79%
Province 2	89%	57%	82%	57%	54%	79%
Province 3	46%	93%	82%	54%	43%	100%
Province 4	61%	68%	86%	46%	57%	82%
Province 5	64%	71%	75%	61%	43%	64%
Province 6	57%	96%	57%	61%	39%	71%
Province 7	68%	50%	57%	64%	54%	71%
Province 8	46%	89%	71%	46%	46%	61%
Province 9	50%	75%	57%	46%	29%	43%
Province 10	39%	46%	54%	39%	43%	50%

Respondents were asked a series of questions to determine the extent to which a philosophy of inclusion underpins the child care policy environment. The questions were as follows:

- Does the government have a "zero reject" policy such that no ECD program is allowed to exclude children on the basis of disability, or any other ground consistent with provincial human rights policy?
- Does the government have a policy requiring that the physical environment (i.e. space, furniture, equipment, building etc.) of ECD programs facilitates the full inclusion of all children, and ensures their safety and well-being?
- Does government policy require that ECD programs reflect recommended practices with regard to inclusion, child-staff ratios, group size, caseloads, safety and assistive technology?
- Does the government policy require that ECD administrative and teaching staff have training, knowledge and credentials in inclusive practices and on-going professional development, particularly in relation to inclusive education practices?
- Does government policy require the provision of family/child-centred comprehensive interdisciplinary services for children with disabilities in ECD programs?

As Table 3 illustrates, responses ranged widely across the country.

Similar questions were asked to determine the degree of legislative, policy and budgetary support for inclusion. (See Appendix A.) For the most part, the inclusivity of the child care policy environment in Canada was less supported by an underlying philosophy of inclusion, legislation, regulations and standards and guidelines than by programmatic requirements, budgetary measures and monitoring systems. Table 3 details the summary of scores in each of these areas across the country, highlighting exemplary policy environments that should be further examined as potential best practice models.

Table 3. Legislative, Policy and Budgetary Support for Inclusion

Province/ Territory	Philosophy of Inclusion	Legislation	Regulations	Standards & Guidelines	Program Requirements	Budgetary Measures	Monitoring Framework
Province 1	58%	50%	38%	83%	92%	88%	96%
Province 2	63%	63%	50%	63%	100%	75%	75%
Province 3	75%	63%	63%	58%	92%	67%	71%
Province 4	75%	38%	58%	75%	67%	67%	88%
Province 5	38%	25%	33%	71%	92%	83%	100%
Province 6	71%	38%	38%	67%	79%	75%	79%
Province 7	63%	29%	50%	38%	92%	75%	79%
Province 8	58%	54%	50%	54%	75%	63%	67%
Province 9	67%	38%	25%	42%	71%	63%	46%
Province 10	46%	25%	25%	46%	71%	54%	50%

Key Policy Issues

The intent of this study was to establish benchmarks for inclusive child care policies. It is clear from the summary tables presented above that most jurisdictions have a way to go in meeting the benchmarks established for the study. In a number of cases officials found the exercise helpful in identifying the direction toward which they should be heading, and in this sense, the exercise has also turned out to be successful in "raising the bar". During their interviews, officials in several jurisdictions stated that they had found the benchmarks quite helpful and instructive. They drew specific attention to the benchmarks for staffing, program requirements, program accommodations and monitoring and evaluation. One government official, for example, stated that the jurisdiction's goal is to reach the benchmarks specified under program requirements and monitoring and evaluation. Benchmarks targeted at public education were also found to be helpful, especially in raising awareness about its importance and the current lack of investments in this area.

A number of other policy issues emerged from the benchmarking exercise and interviews with government officials and non-governmental experts in jurisdictions across Canada. These are summarized below.

1. Delinking Early Childhood Education and Child Care

This study focused on inclusion benchmarks as they applied to child care policy as an essential component of a healthy child development strategy. It is quite concerning that in many jurisdictions there is an apparent separation and lack of coordination between child care and early childhood initiatives. Nowhere has this been more clearly illustrated than in Ontario.

In the late 1990s the Ontario provincial government commissioned a study by Fraser Mustard and the Hon. Margaret N. McCain on the early years. When the study — which advocated for universal early childhood programs — was released, the Minister for Children was asked whether this meant the government would expand child care services. The minister replied, "What does early childhood education have to do with child care?" The province subsequently put federal monies from the *Early Childhood Development Initiative* (ECDI) toward early childhood information centres (referred to as kiosks by critics) and none towards child care. Their efforts have since been criticized in a follow-up report by Mustard and McCain as clearly inadequate because the initiatives have focused on children at risk and children with special needs rather than the needs of all children.

At issue here, is the relatively low status that child care has typically had on the policy agenda across the country. Women's caring work is typically devalued in Canada, and in most societies. This has resulted in a fragile, fragmented child care system in every jurisdiction. Child care staff have had to struggle to earn a living from the meagre wages and low status assigned to their profession. At the same time, they have been struggling to keep the doors open at their underfunded workplaces, and struggling to provide quality programming, often under conditions of duress. It is no wonder that in many jurisdictions, officials identified the fragmentation of the sector and the lack of a single, strong voice to lobby for better, more just child care policy development and practices, as a key issue in efforts to bring about change.

2. Quality of Care

The quality of child care continues to be an issue across the country. While of importance to all children attending child care, it is of particular concern in the context of inclusive child care. One director of Early Childhood Education declared that the standard was so low in some of the child care centres that she did not understand why parents left their children there. She added that parents often do not know what goes on in a centre in their absence. Some of the informants emphasized that the licensing process sets only a minimum standard. Monitoring, on the whole, tends to look at whether centres are meeting these minimum standards. Officials pointed out that there is no real monitoring to ensure effective, quality programming for children identified with special needs, indeed for all children.

High staff turnover exacerbated by low wages, lack of staff training, and limited resources continues to affect quality. A few of the provinces (Saskatchewan, Prince Edward Island, Nova Scotia and Newfoundland and Labrador) and the Yukon Territory, have become involved on a pilot basis with Keeping the Door Open, a project supported by SpeciaLink designed to maintain and enhance the capacity of centres to include children with special needs and to improve the overall quality of care.

A number of officials made reference to their jurisdiction's involvement in this and various other pilot projects aimed at improving the inclusiveness and quality of care. The pilots have demonstrated the success of inclusion when it is properly resourced. Without an injection of dollars, gains made by the pilots cannot be sustained. Indeed, the more successful the pilots have been, the higher the demand has become for the service. The demand just can't be met without more resources. A major policy push needs to be made now to go beyond the pilots and properly resource the child care sector to roll out these initiatives across the country. As one child care expert stated, child care centres are "leading the way. It's the centres that are showing the government how to do it."

3. Environmental Accommodations

All provinces and territories are subject to a federal building code, which since 1998 has included a section on accessibility. The code sets a minimum standard and it is up to the provinces to enhance and/or strengthen this standard through their own building codes. The federal code does apply to child care centres but not retroactively.

Regardless, not all provinces have included child care centres in provincial legislation regarding accessibility. As well, there is a considerable amount of variation from jurisdiction to jurisdiction as to what monies are available to make centres accessible. For example, some jurisdictions pay for additional equipment while others do not. In addition, there is great variance in monitoring and enforcement, described in at least one province as weak.

Many jurisdictions cited the need for money for capital investments. Again, because of the low value and lack of resources assigned to child care in the past, many child care centres were set up in substandard conditions, in church basements, in community centres, or even in private homes. In several jurisdictions, government legislation at one time or another had a positive impact on the resourcing of physical accommodations for child care centres. For example, the Government of Ontario at one time passed legislation requiring properly designed child care centres to be built whenever a new school was built. This resulted in quality centres being built. The legislation has since been repealed under a new government; however, it does demonstrate the effectiveness of a strong legislative framework in this regard.

While building codes in most jurisdictions do cover child care centres, they are often not enforced. Often, centres failing to meet accessibility criteria, simply turn children with disabilities away. This, for example, is standard policy in one province when centres cannot meet the evacuation standards in the case of children with disabilities. In some cases, building codes apply only to new construction, with existing centres being grandfathered. As a result, children must be carried up and down the stairs, at least until they become too heavy and parents have no choice but to withdraw them from the program. Enforcement tends to be complaint-driven in some jurisdictions, and lack of funding for capital investments often forces closure of centres failing to comply, exacerbating the shortage of spaces.

Building codes however, typically govern only indoor space. Playgrounds typically are not accessible, compromising the right to play of children with disabilities. Officials in one jurisdiction cited the change in legislation around environmental accommodations as having a positive effect on the accessibility of centres, but not on playgrounds. Clearly this is an area for policy attention across the country. Children's well-being and development is at serious risk without space to play, to socialize and to learn to be citizens.

4. Family Participation

While nearly all jurisdictions espouse the importance of family participation and family-centred programs, how this is reflected in both policy and practice varies. In jurisdictions where child care centres are not-for-profit, a board of directors that includes parents is usually required. In jurisdictions where centres are commercial, no boards are required. Most jurisdictions are now using some form of an Individual Program Plan (IPP) and Individual Family Service Plan (IFSP). This is usually governed by guidelines at least, although it is sometimes required by legislation, ensuring some degree of parental participation, and in most cases consent.

Most jurisdictions have made some attempt to include parents in overall system planning and reform. In some cases this happens at the local level only, although in other cases it happens at the provincial/territorial level.

The preponderance of private for-profit child care in some jurisdictions was cited as a major factor contributing to the exclusion of parents from governance of child care centres and full participation and involvement in their child's care. Clearly this is an area of policy concern. As the new *Multilateral Framework for Early Learning and Care* is rolled out across the country, careful analysis should be made regarding the pros and cons of public not-for-profit versus private for-profit child care. Given the principles of availability, accessibility, affordability, quality, inclusivity and parental choice, and the goals of citizenship, participation in governance and equality that underpin this initiative, the *Social Union Framework Initiative* and the *In Unison Accord*, for example, what model of delivery of child care is best suited to do the job? Is there a place for for-profit day care given these principles and goals? If so, what is the best balance between not-for-profit and for-profit centres and the best policy mix to regulate and enforce standards to meet best practices?

5. Program Accommodations

No jurisdiction has a system of accreditation for inclusive child care centres. However, British Columbia is moving towards an accreditation system for all child care centres (not specific to inclusive centres). New Brunswick tried to have an accreditation system for a few years, but it was discontinued after objections were raised by local agencies.

Most jurisdictions have some sort of policy/standard that requires that all children's needs be met, including those with special needs. There is a good deal of variation across the county in the degree of government monitoring, enforcement of standards and provision of additional government funding to correct program deficits.

A key issue across the country is the lack of understanding about inclusion and the lack of resources to achieve inclusion. A number of practices were cited in many jurisdictions that prevent inclusive programming. For example, providing funding to a child for one-on-one staff can lead to situations of "shadowing" or separating the child from activities undertaken by the rest of the children. Also cited was the lack of awareness on the part of many parents about child development needs and what constitutes quality, inclusive programming. Without this knowledge, parents are not able to advocate for what is best for their child. Officials also raised concerns about the lack of mechanisms for exchanging knowledge about and lessons from existing best practice models across the country. An informant from Province 2 identified one such mechanism:

> *Where you see particular centres that are really doing inclusion — staff may move from centre to centre and take their knowledge with them and influence the new centre. The question becomes how can you maintain momentum, if there is no receptivity from the director? The field tends to rely on [a provincial child care association] to advocate for these kinds of issues. They always have at least three to five workshops on inclusion at the yearly conference. This past fall, [a provincial Association for Community Living] held a two-day conference for parents of children with special needs, child care centre staff and child development counsellors. It was very empowering. As staff learn about the parents' point of view, hopefully they can work for change too.*

6. Staffing

Qualification requirements for staff caring for children with special needs or, for child care staff in general, range from nothing to community college specialty qualifications in Early Childhood Education (ECE). Most jurisdictions require some ECE training. Usually such ECE programs include at least a basic introduction to working with children with special needs. The ECE philosophy of meeting individual needs is a good underpinning for inclusive child care; however practical information/training about specific disabilities is critical. Nonetheless, it is unclear to what degree workers are receiving this training. Staff development for people already working in the field faces obstacles arising from the cost of release time for teachers and the difficulty in finding replacement workers. Training workers in family-based child care is an additional challenge.

No jurisdiction appears to have a comprehensive jurisdiction-wide personnel policy in place for child care workers. Rather, individual centres set most of their own policies. A number of informants mentioned the difficulty of finding qualified workers. Low wages that make it harder to attract and retain qualified staff, and high staff turnover are issues across the country. In many jurisdictions, wages hover around minimum wage, making it difficult to attract highly trained staff. The resulting lack of continuity has implications for the standard of care for all children, but particularly for children with special needs.

Officials in many jurisdictions raised concerns about the widespread policy of hiring workers with no formal qualifications in either child development or special needs as primary one-on-one special needs support workers. For many officials, it makes no sense that children with the highest need are being cared for by those least prepared to meet their needs. Besides the potential risk to the well-being and development of children who are already vulnerable, this policy approach perpetuates the underdevelopment of knowledge and resources about inclusion within the child care sector. Unqualified special needs workers tend to be paid even lower wages than the already underpaid fully qualified child care workers. Low wages, usually without benefits, result in a high turnover of these staff. Instead, investments in highly qualified experts in the field of inclusive child development who could train and support existing child care workers would be a much more effective policy approach. Linking child care to public education and to school-based resources, and remunerating child care staff on an equal basis with others working in the education of children is another policy direction some officials suggested should be explored. Given the importance of the early years, many would also like to see investments made to ensure that only the highest quality staff care for children at this most vulnerable stage of their development. As one official put it:

> *I would like to have more programs like Partnerships for Preparing for Inclusion training. I'm a firm believer in having all staff trained in special needs in all facilities—not just having one specialist. For inclusion to be successful, you have to have the right attitudes and beliefs. For example, children have the right to participate in all activities as opposed to pull-out programs where the resource teachers take them aside to teach them particular skills and philosophy. Centre staff members need to have the training so that they have the confidence to work with all children. That is opposed to the resource teacher who takes the child out, but doesn't work within the larger framework and who doesn't meet their needs within the context of the regular program.*

7. Services

All informants supported the principle of comprehensive support services for children with special needs, at least in theory. How these services are made available varies considerably across the country. For example, in some jurisdictions services are provided in the child care centre itself, while in other jurisdictions parents must transport their child to another facility, usually during working hours, to receive specialized treatments and/or services. Typically, services that are not embedded in the child care program are disruptive to the child and to his or her family. In addition, interventions tend to be more limited in nature, frequency and scope than interventions embedded in the program, often failing to fully meet the needs of the child, and his or her family.

In a review undertaken in the late nineties, one jurisdiction concluded that services were fragmented and limited in availability in rural areas of the province. The government in that jurisdiction is taking steps to correct this situation. It is likely that there are similar problems in other parts of the country, but the benchmark survey did not make this clear.

Although specialised disability-related services in most areas of the country are in theory "cost neutral", this may have limited significance if the availability of services is restricted (e.g. number of visits). Once the child exhausts the number of visits allowed or exceeds the designated age limit, parents may be required to pay for private services (e.g. occupational therapy, speech therapy, etc.). For example, in one jurisdiction, support services are provided through Community Care Centres, but access to the centres is determined by the age of the child rather than by the child's need for services. Similar eligibility restrictions are in place for services in most provinces and territories.

According to officials in several jurisdictions, parents often are not able to get funding needed for extra services and supports for their children. Recently released data from the *Participation and Activity Limitations Survey* (PALS) confirms this. Sometimes parents are required to pay an extra fee to the child care centre that they cannot afford. This may result in parents not being able to access child care, or in having their child attend on a part-time basis only. In rural and remote locations there is often a lack of access to specialized disability-related supports and services. This is particularly the case in many First Nations communities. As a result, parents of children with disabilities in these areas may not be able to access child care services for their children.

Officials in several jurisdictions also cited long waiting lists for services, due to the overloaded system of supports and services. In some cases, children have lost their space in a child care centre because they are sitting on a waiting list for services. Sometimes children may attend child care, but without the supports they need. Other times, they are prevented from attending altogether due to the lack of supports and services. Concern was raised that a two-tiered system has developed, as parents with access to private health insurance, or with more disposable income are able to purchase the needed supports and services. This results in some children being over-resourced, while others get nothing.

Informants also raised concern that the transition to school is hampered when the supports and services being received in child care don't follow the child into school. Sometimes parents hold their child back from attending school if they feel that they will be better supported in their child care setting. As well, informants noted that "safe school" policies have had a disproportionately harsher effect on children with disabilities. With "zero tolerance" for behavioural problems, many children with disabilities who have behavioural challenges are being excluded from school. Informants raised the concern that child care centres were becoming "dumping grounds" for schools that are unable to properly support children's behavioural needs.

Another emerging issue raised across the country is the high proportion of early childhood development money being allocated to services for children with autism. Recent court decisions will likely raise the profile of this issue. As one informant stated:

> *We are developing a two-tier system where children with autism are being prioritized and other children with special needs are not receiving the same level of service. The provincial government here indicated that they would be putting aside $2 million for autistic children in 2000.*

Other informants raised concerns about the nature of the "treatments" for children with autism being funded:

> *ABA (Applied Behaviour Analysis) is highly popular…I just heard that every worker working with an autistic child will get ABA training. Many people in ECE are not in favour of behaviour modification methods and personally I would like to have seen more progressive methods. There has been some discussion that this method is also beneficial for any child with challenging behaviour and I am quite concerned about that. All the information/research we have on cognitive development and personality development takes us to a humanistic approach. We have the research to show what is necessary. It really concerns me that we are moving away from that.*

While others questioned the message being sent to parents about inclusion:

> *The message seems to be that your child needs to learn certain skills before they can be integrated. It sends a double message to parents where parents are being told, in effect, that inclusion is a lesser option, and that their child can only be properly supported through intensive one-on-one support with a strong behavioural component. We don't agree with this message.*

APPENDIX A
ECD Policy Analysis Tool

Introduction

This instrument is intended to assist families and policy analysts to assess their government's child care or early child development policies by a number of integral policy elements and a set of recognized principles of best practice and inclusion that underpin the *Social Union Framework Agreement* (SUFA), the *National Children's Agenda* (NCA) and the *Early Childhood Development Initiative* (ECDI). The instrument is one tool that families can use to engage their communities and governments in discussions about needed ECD reforms and to hold them accountable for investments in healthy child development made under the ECDI. It should be used in conjunction with *SpeciaLink's Child Care Inclusion Profile* and *SpeciaLink's Child Care Inclusion Principles Checklist,* which assesses the quality and inclusivity of child care programs. The instrument is based on a framework that is fully inclusive of, and values all children regardless of differences in ability, gender, aboriginal status, ethnicity, language, culture, etc. It draws on work of researchers in education and early child development, including the following:

- *Early Childhood Environment Rating Scale – Revised* (ECERS-R)[11]
- *Early Childhood Special Education Program Design and Development Guide* (EC-SPEED)
- *Benchmarks of Recommended Practice: Needs Assessment for Successful Inclusion of Infants and Toddlers with Disabilities in Natural Settings*[12]
- *Child Care plus+ Curriculum on Inclusion*[13]
- *Consortium on Inclusive School Practices – Framework for Evaluating State and Local Policies for Inclusion*[14]
- *SpeciaLink's Child Care Inclusion Profile*[15]
- *DEC Recommended Practices in Early Intervention/Early Childhood Special Education*[16]
- *You Bet I Care! Supplementary scale to explore inclusionary practices with children who have special needs*[17]
- *Administrator's Policy Handbook for Preschool Mainstreaming*[18]

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[11] Harms, Clifford & Cryer (1998).

[12] Child Development Resources (2002).

[13] Mulligan et. al. (2000).

[14] Consortium on Inclusive School Practices (1996).

[15] SpeciaLink (1992).

[16] Sandall, McLean & Smith (eds.) (2000).

[17] Doherty et. al. (2000).

[18] Smith & Rose (1993).

Many in the disability community have raised concerns that assumptions about child development guiding the development of a public monitoring framework are not inclusive. For example, standards of "readiness to learn" and norms of child development used in many early childhood policy discussions, define children with disabilities as deficits from the outset. There is a growing concern that when measured against such standards, children with disabilities will come to be seen as less worthy of investments needed to maximize their developmental potential and to support their full inclusion in their families, schools and community life.

This instrument begins with the assumption that all children develop according to their own unique paths, and that healthy child care/ECD policies must be geared to meet the unique needs of every child and family. Central to this instrument then, is the firm belief that inclusive policies serve all children better, and result in healthier development for all children and their families.

Policies are assessed according to six major elements: 1) Participation of Children with Disabilities; 2) Environmental Accommodations; 3) Parent/Family Participation; 4) Program Accommodations; 5) Staffing; and 6) Services.

For each of these six elements, a set of questions has been developed to assess how well each element is reflected and supported by the following: 1) Philosophy re: Inclusion; 2) Legislation; 3) Regulations; 4) Standards and Guidelines; 5) Program Requirements; 6) Budgetary Measures; and 7) Monitoring and Evaluation Frameworks.

A set of six charts follows, with room for rating ECD policies on a scale of 1 to 4, according to how well they reflect the principles and meet the needs of children and their families. These are followed by a set of summary score sheets and a scoring guide for rating the inclusivity of the ECD policy environment. With these scores in hand, families and policy analysts should be better prepared to advocate for better child care/ECD policies and for a shift in ECD investments accordingly.

1. Participation of Children with Disabilities in Child Care

Scale: 1-4 1 = not at all 2 = in development 3 = somewhat 4 = fully in place

1. Philosophy re: Inclusion Does the government have a "zero reject" policy such that no ECD program is allowed to exclude children on the basis of disability, or any other ground consistent with provincial human rights policy?	1 2 3 4
2. Legislation Does provincial legislation require all ECD programs to include children with disabilities in the ECD program of their parents' choice with the same range of program and attendance options open to children without disabilities?	1 2 3 4
3. Regulations Are there provincial regulations requiring all ECD programs to include children with disabilities in the ECD program of their parents' choice with the same range of program and attendance options open to children without disabilities?	1 2 3 4
4. Standards and Guidelines Have provincial standards or guidelines been issued concerning the inclusion of children with disabilities in the ECD program of their parents' choice with the same range of program and attendance options open to children without disabilities?	1 2 3 4
5. Program Requirements Does the government require a range of ECD models to accommodate the needs of all children and their parents in both urban and rural areas and support public education around the principles and practices of inclusion and diversity?	1 2 3 4
6. Budgetary Measures Are budgets, supports and resources necessary for the full inclusion of children with disabilities in ECD programs provided, including child care subsidies for low-income parents? Are budgets available to finance a range of ECD models to accommodate the needs of all children and their parents in both urban and rural areas and for public education around the principles and practices of inclusion and diversity?	1 2 3 4
7. Monitoring and Evaluation Frameworks Does the government have mechanisms in place to ensure accountability and compliance regarding the inclusion of children with disabilities? Are data on diversity in ECD programs available?	1 2 3 4

2. Environmental Accommodations

Scale: 1-4 1 = not at all 2 = in development 3 = somewhat 4 = fully in place

1. Philosophy re: Inclusion Does the government have a policy requiring that the physical environment (i.e. space, furniture, equipment, building, etc.) of ECD programs facilitates the full inclusion of all children, and ensures their safety and well-being?	1	2	3	4
2. Legislation Do provincial building codes and other physical environment regulations and guidelines that govern accessibility for people with disabilities apply to ECD locales?	1	2	3	4
3. Regulations Are there provincial regulations concerning the physical environment (i.e. space, furniture, equipment, building, etc.) of ECD programs to facilitate the full inclusion of all children, and ensure their safety and well-being?	1	2	3	4
4. Standards and Guidelines Does the government have guidelines or standards concerning the physical environment (i.e. space, furniture, equipment, building, etc.) of ECD programs to facilitate the full inclusion of all children, and ensure their safety and well-being?	1	2	3	4
5. Program Requirements Does the government ensure that instructional models use materials that are accessible to and meet the individual needs of children?	1	2	3	4
6. Budgetary Measures Does the government ensure that all programs have accessible buildings, furniture, equipment and disability supports, including assistive technologies for classroom use? Does the government ensure budgetary supports to ensure accessibility of buildings, furniture and equipment and for disability supports that meet the needs of children and their parents, including assistive technologies for classroom use?	1	2	3	4
7. Monitoring and Evaluation Frameworks Do monitoring and evaluation frameworks include measures on compliance with provincial building codes and other physical environment regulations and guidelines?	1	2	3	4

3. Parent/Family Participation

Scale: 1-4   1 = not at all   2 = in development   3 = somewhat   4 = fully in place

1. Policy/Program Philosophy re: Inclusion Does the government have a policy to ensure family-centred ECD programs?	1 2 3 4
2. Legislation Does the government have legislation in place governing IFSPs and IPPs that protects the rights of children and their parents to be involved in decision-making?	1 2 3 4
3. Regulations Are there provincial regulations governing IFSPs and IPPs that protect the rights of children and their parents to be involved in decision-making?	1 2 3 4
4. Standards and Guidelines Are there provincial guidelines and standards in place governing IFSPs and IPPs that protect the rights of children and their parents to be involved in decision-making?	1 2 3 4
5. Program Requirements Does the government have mechanisms in place to ensure the rights of parents to participate in the development of IPPs, a multidisciplinary team and decision-making?	1 2 3 4
6. Budgetary Measures Does the government ensure the participation of parents/community members in planning the delivery of services, supports and resources and in the development of government system reform, standards and policies? Do budgets provide for subsidies for transportation, parking and child care so that low-income parents can attend meetings?	1 2 3 4
7. Monitoring and Evaluation Frameworks Are parents/community members actively involved in program design, monitoring and evaluation exercises?	1 2 3 4

4. Program Accommodations

Scale: 1-4 1 = not at all 2 = in development 3 = somewhat 4 = fully in place

1. Policy/Program Philosophy re: Inclusion Does government policy require that ECD programs reflect recommended practices with regard to inclusion, child-staff ratios, group size, caseloads, safety and assistive technology?	1 2 3 4
2. Legislation Is there provincial legislation governing accreditation of inclusive programs?	1 2 3 4
3. Regulations Are there provincial regulations governing accreditation of inclusive programs?	1 2 3 4
4. Standards and Guidelines Are there provincial guidelines and standards in place governing accreditation of inclusive programs?	1 2 3 4
5. Program Requirements Does the government ensure that multiple instructional models are available to meet the individual needs of children (e.g. less structure or more structure child-driven to teacher-driven, peer-mediated to teacher-mediated, etc.)?	1 2 3 4
6. Budgetary Measures Are there any mechanisms in place to ensure that program shortcomings indicated by evaluations of program delivery, and child and family outcomes get addressed and lead to necessary improvement/changes? Are there budgetary measures provided to address program shortcomings indicated by evaluations of program delivery, and child and family outcomes?	1 2 3 4
7. Monitoring and Evaluation Frameworks Does the government ensure that ECD program evaluation is conducted at regular intervals, is comprehensive, multi-dimensional and incorporates a variety of methods? Does the government also ensure that evaluation efforts take into account differing cultural, contextual, demographic and experiential perspectives including those of parents and children with disabilities?	1 2 3 4

5. Staffing

Scale: 1-4 1 = not at all 2 = in development 3 = somewhat 4 = fully in place

1. Policy/Program Philosophy re: Inclusion Does the government policy require that ECD administrative and teaching staff have training, knowledge and credentials in inclusive practices and ongoing professional development, particularly in relation to inclusive education practices?	1 2 3 4
2. Legislation Has the government introduced legislative measures governing staff hiring, retention, salary scale/benefits/compensation, workplace safety, supervision, conflict resolution, arbitration mechanisms, job description, preparation time and evaluation that are supportive of inclusive practices?	1 2 3 4
3. Regulations Does the government have regulations in place governing staff hiring, retention, salary scale/benefits/compensation, workplace safety, supervision, conflict resolution, arbitration mechanisms, job description, preparation time and evaluation that are supportive of inclusive practices?	1 2 3 4
4. Standards and Guidelines Does the government have standards and guidelines concerning staff hiring, retention, salary scale/benefits/compensation, workplace safety, supervision, conflict resolution, arbitration mechanisms, job description, preparation time and evaluation that are supportive of inclusive practices?	1 2 3 4
5. Program Requirements Does the government promote flexible staffing models, scheduling, etc. based on local needs?	1 2 3 4
6. Budgetary Measures Does the government ensure that the teaching and programs reflect what are considered current standards and best practices and have mechanisms in place to disseminate information on best practices? Are budgets sufficient to provide for fair salary and benefit scales reflecting the skills and responsibilities of staff? Do they provide funding for dissemination of information, including best practice information?	1 2 3 4
7. Monitoring and Evaluation Frameworks Do monitoring and evaluation frameworks include measures on compliance with inclusive program and teaching practices?	1 2 3 4

6. Services

Scale: 1-4 1 = not at all 2 = in development 3 = somewhat 4 = fully in place

1. Policy/Program Philosophy re: Inclusion Does government policy require the provision of family/child-centred comprehensive interdisciplinary services for children with disabilities in ECD programs?	1	2	3	4
2. Legislation Does provincial legislation require that family supports, service coordination, transition planning and other practices occur in response to child and family needs rather than being determined by the age of the child or other such criteria?	1	2	3	4
3. Regulations Do provincial regulations require that family supports, service coordination, transition planning and other practices occur in response to child and parental needs rather than being determined by the age of the child?	1	2	3	4
4. Standards and Guidelines Does the province have guidelines or standards concerning eligibility criteria for family supports, service coordination, transition planning and other practices based on the needs of children and their parents rather than on the age of the child?	1	2	3	4
5. Program Requirements Does the government promote the regular use of IFSPs and IEPs to determine the type and amounts of services and desired outcomes?	1	2	3	4
6. Budgetary Measures Does the government monitor the type and amounts of services and desired outcomes according to specifications laid out in IFSPs and IEPs? Are budgets allocated on the basis, the type and amounts of services and desired outcomes specified in IFSPs and IEPs?	1	2	3	4
7. Monitoring and Evaluation Frameworks Do monitoring and evaluation frameworks examine the flexibility, coordination and planning of services including transitional planning and coordination to ensure that the needs and rights of children and parents are met as they move into and out of child care?	1	2	3	4

Sample Summary Score Sheet

Name of Program ABC Child Care Program	Physical Environment, Equipment and Materials	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion	4	4	4	4	4	4	24
Legislation	4	4	4	4	4	4	24
Regulations	4	4	4	4	4	4	24
Standards and Guidelines	4	4	4	4	4	4	24
Program Requirements	4	4	4	4	4	4	24
Budgetary Measures	4	4	4	4	4	4	24
Monitoring and Evaluation Frameworks	4	4	4	4	4	4	24
Total Score For Each Column	28	28	28	28	28	28	168

Blank Summary Score Sheet

Name of Program	Physical Environment, Equipment and Materials	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion							
Legislation							
Regulations							
Standards and Guidelines							
Program Requirements							
Budgetary Measures							
Monitoring and Evaluation Frameworks							
Total Score For Each Column							

Scoring Guide

Maximum score for any one column is 28.
Column score of 0 – 13 = Policy environment will not meet children's/families' needs in this area
Column score of 14 – 19 = Policy environment will meet some of children's/families' needs in this area
Column score of 20 – 24 = Policy environment will meet most of children's/families' needs in this area
Column score of 25 – 28 = Policy environment will meet children's/families' needs in this area

Maximum score for any one row is 24.
Row score of 0 – 12 = Policy environment will not meet children's/families' needs in this area
Row score of 13 – 16 = Policy environment will meet some of children's/families' needs in this area
Row score of 17 – 20 = Policy environment will meet most of children's/families' needs in this area
Row score of 21 – 24 = Policy environment will meet children's/families' needs in this area

Maximum table score is 168.
Total score of 0 – 83 = Unacceptable policy environment [less than 50%]
Total score of 84 – 113 = Poor to barely adequate policy environment [50% - 67%]
Total score of 114 – 146 = Adequate to good policy environment [68% - 87%]
Total score of 147 – 168 = Excellent policy environment [higher than 87%]

APPENDIX B
Summaries of Benchmark Policy Survey

Newfoundland and Labrador

Participation of Children with Disabilities in Child Care Programs

There is neither a "no reject" policy regarding the inclusion of children with special needs in child care in Newfoundland and Labrador nor prohibitive legislation. When a parent with a child with special needs wants his/her child to attend a specific child care centre, the question asked is whether or not the centre is able to meet the needs of the child. If it cannot, then it is up to the parents to find another centre, although the government might assist them in finding an alternative.

While there are no child care regulations or legislation requiring the inclusion of children with disabilities, the Health and Child Care Settings Guidelines for Child Care Centres and Early Childhood Providers does talk about centres in relation to children with special needs. It provides general information about the characteristics of various disabilities and sets out general goals.

Newfoundland and Labrador replaced its 1975 child care legislation in 1999. Prior to that there was no licensed child care for children under the age of 2.

The government does not choose child care sites. Rather, the community makes an application to the government for licensing and funding. So, there are communities where there is no licensed child care because no one has come forward with an application for a licence. Newfoundland and Labrador is beginning to regulate family child care, which should lead to an increase in available spaces. Also, links have been established between the home visiting program and local child care (i.e. a pilot program for children with autism works with child care centres). Child care may be recommended by the home visiting program or the Individual Student Support Program (ISSP). The child may attend child care for other reasons (e.g. parental work or education) in which case the child care service would have a representative on the ISSP team. There has been a considerable effort to strengthen local networks through an interdisciplinary team approach. If a child is attending a child care service then child care personnel would be part of the team.

There has been no public education with regard to the inclusion of children with special needs. Parents of children with special needs can apply for the Special Child Welfare Allowance that pays for extraordinary expenses associated with the disability. This fund may be accessed by families that are financially eligible to pay for a support worker to enable a child to attend child care. Newfoundland and Labrador has moved to a flat rate for the child care subsidy ($21.50 per day for children aged 2-12 years and $30 per day for children aged 0-24 months) and a greater number of families are now eligible for it. If they meet other eligibility requirements, recipients of social assistance automatically receive a child care subsidy if there is a need for child care due to parents attending work/school, child development reasons or the need for family support.

Accountability and monitoring are largely carried out through regular visits by a social worker and the regional child care consultant. Assessment is also part of the licensing process. Data are not kept concerning the total number of children with disabilities in child care, but only for those whose families receive a subsidy. Approximately 273 children with special needs received a child care subsidy in 2001. In regulated care, 1,015 children received a subsidy (Child Care Resource and Research Unit 2001).

Developed by concerned citizens 25 years ago, "The Daybreak Parent Child Centre" caters almost exclusively to children with special needs, mostly from low-income families. The centre, funded mostly by government, provides support to parents and programming for children, and support to other centres caring for children with special needs, particularly children with behavioural problems.

Environmental Accommodations

Under provincial building accessibility legislation, all child care centres must be accessible. Government inspectors go in at least once a year to ensure centres meet the Fire/Life Safety and Environmental Health standards. The new *Child Care Services Act* has resulted in some centres having to make changes to their premises for program reasons. The government pays for the costs of renovations. If there are any renovations to the building, the renovations must meet Building Accessibility standards. There is also an equipment grant which parents can access through the *Special Child Welfare Allowance* (SCWA). Through the child care licensing process, the government ensures that materials meet the individual needs of all children. Child care services staff (social workers and child care consultants) and government services staff (fire/life safety and environmental health inspectors) deal with playground equipment and toys.

Parent/Family Participation

The government does not have a policy to ensure family-centred child care programs. The vast majority of child care centres are commercially run. Having a board of directors used to be required under the old regulations, but apparently it did not work and was repealed.

While at present there are no legislation and regulations governing ISSPs, after an enormous amount of work (involving, for example, consultation and training) standards and guidelines are fully in place in most regions of the province. It is assumed that parents will be part of the ISSP development, the interdisciplinary team, and decision-making, although they have the right to opt out.

When Newfoundland and Labrador started to develop the foundation document from which the new child care legislation (Child Care Services Act) was developed, parents were represented. Meeting times were arranged to enable them to attend. Parents were also involved in developing policy related to the new Act.

A routine survey of parent satisfaction is administered at the time of relicensing (and any time there is a need for parent feedback on the centre). Parent satisfaction surveys are sent out to a sample of parents and form part of the assessment of the child care service. In addition, the government will be doing an evaluation of the effect of the new legislation and parents will be an important part of that survey.

Program Accommodations

Government policy does require that child care programs reflect recommended practices with regard to inclusion, child-staff ratios, group size, etc.

There is no accreditation process for inclusive centres. Certain centres may gain a reputation, however, for dealing with a particular disability and then parents of children with the same or similar disability will tend to gravitate to that centre (e.g. a centre that has done well accommodating children with hearing impairments). This has the potential to result in so many special needs children enrolled in one centre that it is no longer inclusive.

While there are no additional funds available if program shortcomings are identified in the course of program evaluation, centres are expected to address any problems and meet a specified standard. Once a problem is identified, government will bring the issue to the centre's attention and work with the staff to rectify the situation. If the problem is serious and persistent, government staff would post a violation order. Next they would take away the centre's licence and issue a conditional one. (A number of conditional licences have been issued since the new legislation was put into place.) The last step would be to revoke the licence.

Regular, comprehensive and multi-dimensional program evaluations are carried out in all licensed child care services and have been for quite some time. However, the government continues to evaluate the processes, including the review of policies and procedures for program evaluation. The evaluation of the program, staffing and so on are done formally on an annual basis. More informal reviews are supposed to be done monthly and this happens in most places, although geography in a few places may preclude this degree of frequency. Regardless of geography, however, if a centre is not operating at the required standard, visits would be conducted as often as required to assist the centre in meeting and maintaining the required standard. The child care services consultant and/or the social worker visit centres monthly. The consultant has a Level IV Child Care Services Certification, which requires a degree level in Early Childhood Education and experience working in child care. The inspectors for fire/life safety and environmental health make annual visits, and other visits as needed.

Staffing

Everyone working with children in child care centres has to have some level of training in the age group with which they work—that is, at least Entry Level Child Care Services Certification (a basic 40-hour course). The centre director has to have Level II Child Care Services Certification (two-year ECE or equivalent). One person in each playroom has to have Level 1 Child Care Services Certification (one-year ECE program). The one- and two-year ECE training requires work with children with special needs. The province has experienced some difficulty in finding qualified people. Those people who were working with children in child care centres when the new Act was proclaimed and who do not have the required level of certification, have four years from 1999 to upgrade. The upgrades are partially (50 percent) funded by the province.

As most of the centres are commercially run, the individual centre is responsible for meeting labour standards. Similarly, the government has no involvement with "promoting flexible staffing models". The government is continuing the move towards ensuring that centres demonstrate best practices, and that information about best practices is disseminated. When the present research was conducted, monitoring practices and evaluation frameworks did not yet include measures on compliance with inclusive program practices.

Services

Under the new Individual Student Support Program (ISSP), interdisciplinary teams are set up. If the child is in child care, the child care centre staff become members of the team. Although the government is promoting ISSPs, a parent can refuse them. In such cases, services would be delivered following the old model, i.e. separate professionals.

Government provides funding to assist with the interdisciplinary services coordination and delivery. This is fully in place with no cost to parents. Monitoring of service delivery is conducted through the ISSP by the local team and not by government.

Prince Edward Island

Participation of Children with Disabilities in Child Care Programs

While PEI has no legislation, policy, regulations or guidelines that mandate the inclusion of children with special needs in child care, in practice children are included—there are no segregated programs. The final decision, however, is left up to the individual centre. In the past ten years there have been very few cases where it was collectively decided that a child care centre was not an appropriate placement for a child due to the nature of his disability. In such cases, home programs were set up. Inclusive practices have not changed since the early eighties, despite successive governments, largely because of the high level of support for inclusion and expectations at the local level.

Centres apply for special needs grants on behalf of the child and this usually goes toward hiring additional staff (at a maximum of $11.50 per hour[19]) to lower the child/staff ratio. This support is available to all children with special needs regardless of whether they are receiving a subsidy or the parents are in the workforce. [20] There is generally not a waiting list for either subsidy or special needs grants.

The Special Needs Grants budget was $783,000 in 2001.

There is a monitoring system to ensure compliance with policies of the special needs funding program. In 2001, 1,072 children with special needs received a child care subsidy (Child Care Resource and Research Unit 2001).

Environmental Accommodations

There is no explicit policy requiring that child care centres' physical environments facilitate inclusion. Nor do the provincial building codes apply to all child care centres as some are not accessible.[21] However, even in the absence of policy and/or legislation, the centre still has to demonstrate how it will be meeting the child's needs. Prince Edward Island has been using the *Early Childhood Environment Rating Scale - Revised* (ECERS-R) in centres with children with special needs across the province. They have been working with directors in early childhood centres to provide training in the use of ECERS-R, and to conduct initial assessments using this tool. Following the assessment, areas that need improvement are identified, with specific goals established to improve levels of quality. Follow-up assessments then quantitatively measure improvements in quality.

The Early Childhood Development Association was given funding for a pilot project to work with 200 staff in 20 centres, based on the "Keeping the Door Open" program. It uses the ECERS-R as well.

There are specific regulations regarding the materials used in a centre, but those regulations do not specifically mention children with special needs. Through the funding policy there is a high level of accountability in this regard. For example, therapists work closely with centres in a collaborative planning process and are able to identify and recommend appropriate materials.

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[19] While there is a ceiling on the hourly rate, there is no restriction on the number of hours.

[20] Families on social assistance are eligible for subsidized spaces under the Child Care Subsidy Program.

[21] As noted in the introduction, federal legislation requires only buildings built after 1995 to be barrier-free.

In terms of budgetary supports, the province provides money only for staffing. Although government staff may play a coordinating role, monetary resources for physical renovations or equipment would be accessed from other sources, including local service clubs, local resource libraries, or through materials on loan from various therapists. Monitoring is done through the licensing process (as indicated above), through ECERS-R and itinerant resources.

Parent/Family Participation

The rights of families to be involved in decision-making and IPPs are protected through the funding policy, as opposed to legislation and regulation. Parents are very much involved in setting goals, etc. for their children and in ongoing communication in order to monitor their child's program

Program Accommodations

Government policy requires that child care programs reflect recommended practices with regard to inclusion, child-staff ratios (under the Child Care Facilities Act), group size and safety. There is no accreditation process for inclusive centres. Instead, a parent chooses a particular centre (it could be any centre) and then the government staff works with the centre to facilitate inclusion. All programs are potentially inclusive.

Instructional models and other supports are determined locally. Depending on what is needed, it could be the family, the local centre, and/or local resources that would take care of the particular need.

How program shortcomings identified though evaluation processes are addressed depends on what the issues are. For example, if it is an issue relevant to licensing, then government may be involved. Other issues may not fall directly under the governmental aegis (e.g. need for equipment). ECERS-R is being used as the primary evaluation tool.

Staffing

The centre director and one other staff must be certified in ECE. Holland College's Early Childhood Education program ensures that the program addresses skill development in those areas related to children with special needs. Additional support staff hired to support a child with disabilities are not required to have training specific to the inclusion of children with special needs, prior to being hired. However, all staff must be involved in ongoing training. Training is provided in the use of ECERS-R, and *SpeciaLink Canadian Supplementary Inclusion Scale* (CSIS) and *SpeciaLink Child Care Inclusion Profile* (SCCIP) (to staff supervisors). Recruitment of qualified staff is a challenge for PEI, as it is for all provinces and territories. Not surprisingly, the centres that pay better attract and retain better staff.

Centres have to submit an outline of staffing as part of the licensing process. Child/staff ratios are monitored regularly. The government may provide funds to lower the ratio in support of a child with special needs. Salaries for special needs assistants are determined by the personnel policies of each individual centre.

Under regulation, centre directors are responsible for ensuring that the needs of all children are met.

The government does not promote flexible staffing models, scheduling, etc. based on local needs in a formal sense, but it does encourage it. The government also encourages teaching methods and program design that reflect best practices, and supports the dissemination of information on best practices.

Centres receiving funding for children with special needs are required to participate in and contribute to regular case conferences with parents, social workers, speech language pathologists, and other professionals as appropriate. Monitoring of the program is therefore a collective responsibility.

Services

Through the funding policy, government requires the provision of family/child-centred comprehensive interdisciplinary services for children with disabilities in child care programs.

Although the government does not have legislation or standards governing the provision of services to children with special needs in child care, in practice family supports, service coordination, transition planning and other practices are taking place. Normally, the question of additional related services would be addressed through the case conferencing process, and coordinated by Regional Health Authorities.

The use of IPPs on a regular basis is ensured at the local level through current practices. The government is not normally directly involved unless such planning fails to take place.

Service coordination is a multi-sectoral activity and the early childhood centre is a key player in this process. The needs of the child are identified at the local level. The approach to meeting needs is community-based and collaborative. For example, a worker at the child care centre might provide respite care for the family on the weekend.

Prince Edward Island does not have a comprehensive early intervention program. However, two of the four Regional Health Authorities have preschool special needs teams. As well, the Departments of Health and Social Services, and Education have developed a provincial autism strategy, which includes assessments and in-home intervention. The Department of Health and Social Services recently established a full- time permanent position for an early intervention coordinator.

PEI has had a community-based kindergarten program since 1977. Kindergarten programs have always been licensed as early childhood centres, and are required to comply with the regulations of the *Child Care Facilities Act* with respect to staff qualifications, child-staff ratios and early childhood program requirements.

In 2000 the provincial government announced public funding for five-year-olds in licensed early childhood programs. Since September 2000, the Department of Education has provided funding for a core kindergarten program for five-year-old children. The core funding provides for a half-day program. The kindergarten program may be licensed as a half-day early childhood centre, or may be provided as part of a full-day program (child care). Approximately 50 percent of kindergarten programs are offered through full-day child care centres.

Two departments are involved in the provision of kindergarten in PEI. The Department of Education provides funding on behalf of parents for tuition costs, develops curriculum (in consultation with staff of Health and Social Services and early childhood educators), monitors the implementation of the curriculum and provides in-service training for kindergarten teachers.

The Department of Health and Social Services is responsible for licensing, certification of kindergarten teachers as early childhood educators and provides funding and monitoring for programs for children with special needs.

Since the introduction of public funding for kindergarten in 1999, participation of five-year-olds has increased from 85 percent to 97 percent.

Transition planning between child care and kindergarten begins a year in advance with school personnel visiting the centre, observing and participating in case conferences.

Nova Scotia

Participation of Children with Disabilities in Child Care Programs

There are no policies, legislation, or regulations that assure that parents caring for children with special needs have access to child care. It is up to the individual centre to decide whether or not a child with disabilities will be included. If the centre is agreeable, the government will provide funding to any licensed not-for-profit or private centre to support the child with special needs. While there are general guidelines with regard to inclusion, these have little professional support. Nonetheless, centres, both private and not-for-profit, have been willing to accept children with disabilities.

The government is currently in consultation with centres regarding the program requirement benchmark. The informant stated that the government would like to reach this benchmark and, with federal funding, will. The funding will allow them to support a broader range of child care models.

Currently, licensed child care centres receive from $28 to $70 per day to support the inclusion of children with special needs, regardless of parental income. Eligibility is based on the child's disability. The grant depends on the availability of funds and is not an entitlement. Most funding goes towards hiring additional staff. Early childhood development centres have an allotment of special needs spaces. Several designated developmental centres provide care to significant numbers of children with special needs.

Child care subsidies are separate from support funds for children with special needs. Parents with children with disabilities do not have priority and are placed on a waiting list for a subsidy along with other parents. There were 238 children with special needs in regulated care in 2001. There were 2,560 spaces with specific allocations to registered not-for-profit centres, and 95 portable spaces (i.e. the space follows the child) that may be used in commercial and not-for-profit centres (Child Care Resource and Research Unit 2001).

Special needs differential funding was $1,005,272 for the year 2001. In addition, government allocated $2 million for services for children with autism and Pervasive Developmental Delay (PDD). Child welfare spent $825,000 on child care, about one half on licensed care.

In Nova Scotia, accountability and monitoring mechanisms are in development. In the meantime, there is an informal feedback process as government staff members often receive calls from parents regarding the effectiveness of a particular program.

Environmental Accommodations

There are no policies, legislation or provincial building codes that require centres to be physically accessible to children with special needs. While there are general regulations regarding the physical environment under licensing, these are not specific to the accommodation of children with special needs.

Licensing requires that instructional materials used in the centre be appropriate for all children. There is still "room to go" in identifying and meeting the needs of children with disabilities in this regard.

Centres have access to grants for budgetary supports for accessibility that they could use for that purpose, but usually do not.

Monitoring of the physical environment is done through the licensing process.

Parent/Family Participation

Nova Scotia has a government policy that, to some degree, ensures that child care centres are family-centred. While in education there are legislation/regulations with regard to IEPs, there is no legislation governing IPPs and parental involvement in child care. While there are guidelines, it is not clear whether every centre is following them. Nonetheless, there is a general expectation that an IFSP/IPP will be in place and that the centre will draw on available supports. In some programs (e.g. autism, and early intervention) the IFSP is part of being in the program.

The government ensures the rights of parents to participate in the development of IPPs through reporting and expectation. The family has access to support from government if there are problems participating in IPP development.

The government requests and facilitates parents' involvement in general planning and system reform, but provides no financial support.

Nova Scotia is moving towards more formal involvement of parents in program design, monitoring and evaluation of child care. This is already happening in the autism and federally-funded ECE initiatives.

Program Accommodations

Nova Scotia is in the process of developing a policy requiring child care centres to reflect recommended practices with regard to inclusion, child-staff ratios, group size, caseloads, safety and assistive technology. There is no accreditation process in place for inclusive child care centres.

The government is moving towards ensuring that multiple instructional models are available to meet the individual needs of children. Where program shortcomings are identified, a government official or someone from the early intervention program would work with the centre to make the necessary improvements. However, there is no comprehensive program evaluation to identify such shortcomings.

Staffing

The government encourages centres to ensure that staff has the necessary training, knowledge and credentials in inclusive practices and ongoing professional development, particularly in relation to inclusive education practices. However, there is no legislation, or regulations, or guidelines in place governing staff hiring, salary, workplace safety, etc. that are supportive of inclusion.

The government does promote flexible staffing models based on local needs. Recently, the government funded a pilot project working with 44 staff in 22 centres using ECERS-R to improve the quality of care. Also, the government distributes a newsletter that includes information on inclusive practices.

Monitoring and evaluation frameworks do not include measures on compliance with inclusive program and teaching practices

Services

There is no official policy requiring the provision of family/child-centred comprehensive interdisciplinary services for children with disabilities in child care programs, although this intent is expressed verbally. Rather than being provided through the child care centres, most of the services are provided to children with special needs through other programs like the *Growing Together Nova Scotia* pilot project under the Department of Community Services and Health in collaboration with IWK Grace Health Centre, Invest in Kids Foundation and the Central and Eastern Regional Health Boards. This project provides "wraparound" prevention and early intervention home visiting and mental health services to "overburdened" families. But this is a family resource for environmentally-at-risk children and is not directly provided to ECD programs, though a child may be involved in both. Early intervention home-based support for children 0-6 at risk of, or with diagnosed delay, is also provided. There is support for the transition to child care and/or school, including consultation and training; however, there is no direct funding. The emphasis is on collaboration rather than on providing families with access to free services.

The provincial legislation and regulations are largely predicated on the age of the child, but the guidelines are more focused on the needs of the child.

While IPPs are required, the government does not monitor them. At present, there are no formal monitoring or evaluation frameworks in place to examine the flexibility, coordination and planning of services in meeting the needs of children with special needs and their families, but this is reportedly a goal.

New Brunswick

Participation of Children with Disabilities in Child Care Programs

There is no "no reject" policy in New Brunswick. If a child care centre does not want to take a child, it is up to them, not the government, to deal with the parents. However, inclusion is less of an issue in New Brunswick given the province's history: it was the first province to legislate the inclusion of children with disabilities in schools. Reportedly, very few children have been turned down by child care centres.

In New Brunswick, regulations regarding child care are thin. What day care regulations there are come under the *Family Services Act* (83, 85). Standards (i.e. Daycare Facilities Operator Standards) that were revised in 1999 are the primary enforcement tool. Under the standards there is a statement regarding the inclusion of all children. In addition, under the *Principles for Child Care* there are principles regarding the inclusion of children with special needs in licensed child care.

Children with disabilities may receive supportive funding under the *Early Childhood Initiative* (ECI). Eligibility for this program is determined by Public Health and therefore based on a medical model definition. Children are then referred to home-based care or a licensed centre. If they are referred to the latter, the centre is required to keep records. Reporting is required for the transition to school.

A limited range of program delivery models is offered. The emphasis is on funding access. In rural areas where there may not be child care facilities, children with special needs would be followed under ECI in home-based care. About 400 children (including children at risk) are served by ECI. There is little information about children with disabilities who have not been referred to ECI. There have been no public education initiatives.

According to a senior government official, "Although New Brunswick has improved dramatically over the last ten years in relation to child care for children with special needs, we still have a long way to go before we have fully accessible child care that is equally available to any child regardless of their disability,[22] language[23], or geographical location." As well, there is a wide range in the level of quality with some centres providing high-quality care and others simply "warehousing" children. Even in high-quality centres, however, there is difficulty in maintaining a high standard from day to day (e.g. while the centre may have a satisfactory staff/child ratio in place, there is usually no backup if a worker should be absent).

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[22] According to this official, it is particularly difficult for parents with children with multiple disabilities and/or behavioural problems to find child care.

[23] New Brunswick's bilingual status poses an additional challenge in terms of accessibility.

There is a day care assistance subsidy program for all parents based on social and financial need. The government does not fund full-time child care for children with special needs. However, the current government has invested 41 percent ($4 million) of the federal *Early Childhood Development Fund* in child care. Part of this funding has gone towards the "Support Worker Project" where they have addressed the child care needs of 61 full-time spaces for children with special needs as part of supporting parents' labour force attachment. A support worker is provided to allow parents to go to work, look for work, or go to school.

Under ECI an average of $3,000 per child is provided per year for supports that may or may not be used to support child care. The most very high-needs children would receive is $5,000 a year. The total fund is $7 million per year. The fund is used to pay for a support worker (maximum 15 hours[24] per week), transportation, top-up for child care fees, nutritional needs and equipment. Last year, 170 children in child care were provided with a one-on-one worker for 15 hours a week, under ECI.

There are no accountability and monitoring structures to track the inclusion of children with special needs. Programs are decentralized and monitored at the local level.

Environmental Accommodations

Since 1998, child care centres have had to meet provincial building code regulations to get licensed. The code includes several sections outlining standards for various physical accommodations. For example, a child care program in a new building was recently required to provide a ramp. Every centre has a duty of "reasonable accommodation" of children with special needs. The regulations are accompanied by guidelines.

Under the Child Care Principles, all programs have to meet individual developmental needs of each child, and provide a variety of activities and materials that meet a range of developmental needs including, by implication, children with special needs.

The government provides limited budgetary support to ensure accessibility of buildings, furniture, equipment and assistive technologies. Though compliance with building codes is apparently monitored on a regular basis, the inspection/enforcement process as described by one informant is "very weak" and largely complaint driven. According to the informant, "The system has a long way to go before a parent could in confidence choose any child care centre knowing that accessibility[25] needs would be accommodated."

Parent/Family Participation

Family-centred child care is one of the stated principles. There is no legislation or regulations in place governing IPPs. Although there were standards in place, there has been some move away from these as it has been argued that such planning should be in place for all children. In fact, there is an ongoing debate as to whether centres should practice "integrated planning" as opposed to having an individual plan for an individual child. However, if the child is receiving ECI funding, then records of the individual child must be maintained. The parents are supposed to be involved in deciding what the funding needs of the child are. Parents are involved in the planning of service delivery, government system reform, standards, etc. as far as ECI goes, but not necessarily child care, although the opportunities are there.

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[24] Part of the reason for limiting the number of support worker hours is to avoid a "shadowing" practice, which might thwart full inclusion.

[25] Physical accessibility is seen to be less of a problem for very small children who can still be lifted. It is seen to be more of an issue as children get older.

Program Accommodations

In New Brunswick, government policy requires that child care programs reflect recommended practices with regard to inclusion, child-staff ratios, group size, caseloads, safety, and assistive technology. However this is not reflected in current legislation or regulations. Interestingly, there was a form of accreditation of "inclusive programs" for a period of time: the government approved inclusive centres for integrated child care, but this was challenged by the Association for Community Living and other advocates, because they believed all centres should be accessible.

While it is understood that centres should be using multiple instructional models to meet the individual needs of children, it is not clear how widely or consistently this is actually occurring.

There are no budgetary mechanisms in place to ensure that program shortcomings identified through an evaluation are addressed. In fact, the government does not do formal program evaluations—just monitoring and consultation that leads to recommendations.

Staffing

New Brunswick does not have training or qualification requirements for child care staff. They are, however, in the process of developing sector standards in general, without specific reference to inclusion.

People who monitor child care centres are trained and provide consultation in best practices. There are no evaluation or monitoring frameworks that specifically examine whether there is compliance with best practices related to children with special needs.

Services

Government policy requires the provision of family/child-centred comprehensive interdisciplinary services for children with disabilities. Although there are needs-based components in the criteria for service, most criteria are based on age.

There is some controversy over the use of individual plans or IPPs, but where services are required, and therefore ECI funding, such reports are required on a regular basis.

The coordination of services for children with special needs is a consideration in the funding model (e.g. allowing for staff to participate in case conferencing). However, most services are provided outside child care through the medical system, under rehabilitation services. The Early Language Program, currently being piloted, will be more community-based.

Ontario

Participation of Children with Disabilities in Child Care Programs

There are no legislative or regulatory imperatives in Ontario specifying that children with special needs must be included in child care programs. Regulated child care, including centre-based and home child care, are licensed under the Day Nurseries Act (DNA). The Act (established many years ago) provides sections that are specifically related to children with disabilities when segregation was the rule. In practice however, Ontario has moved to a more inclusive approach and away from segregated settings. There are only a few segregated settings left in Ontario.

While "there is room for improvement," there is government support for a range of child care models in both rural and urban areas. However, only 10 percent of children requiring care are in licensed programs. There are approximately 172,000 spaces in licensed child care centres, and over 7,000 in licensed private-home day care agencies. None of the Early Childhood Development Initiative federal funds were directed to child care in Ontario.

Since 1999, child care has been made the responsibility of "delivery agents" at the municipal level: there are 47 across the province. The Ontario Ministry of Community, Family and Child Services enters into a contract with the local delivery agent with regard to fee subsidies, wage subsidies, resource centres and special needs resources. The latter provides assistance for staffing, equipment, supplies or services to support the inclusion of children with special needs in child care.

Parents are referred to the agency responsible for providing support, and the agency then negotiates with the centre, based on the level of need. For example, one resource person may be provided for several children. While the intent is to ensure and facilitate the inclusion of children with special needs in child care within fiscal restraints, there is typically a perception from parents that there is never enough. Approximately 44 percent of children in regulated care are receiving a child care subsidy (Child Care Resource and Research Unit 2001). There is a waiting list for child care subsidies. As the provincial contribution to child care subsidies has been frozen since 1995, the actual number of subsidized spaces has gone down, despite an increase in demand. In Toronto, for example, there are approximately 22,600 subsidized spaces and 15,000 children on a wait-list.[26]

Child care centres are held accountable through the service contracts and the licensing process. The government used to obtain data on diversity as part of the licensing process. Now it's up to the delivery agent to collect data required by the funding application.

Environmental Accommodations

Ontario has just passed the Ontarians with Disabilities Act (ODA), which deals with accessibility, but not in relation to child care centres. However, the definition of disability under the ODA has led to a change in the definition used in the DNA. While not set out as specified in the benchmark, child care centres are required to conform to the provincial building code as part of the licensing process, including having an accessible washroom. The program advisor would look at a building for a new centre from the point of view of accessibility. But the program advisor does not go back to existing programs to ensure they upgrade. Commented one informant, "We support inclusion, so we try to make sure that centres are accessible but this is not written down anywhere in clear language." Notably, under the DNA, segregated settings were required to have 5 square metres for each child with a disability, but no stipulation has been determined for inclusive settings. (In inclusive settings, the DNA regulations for children with disabilities are not a requirement for licensing.)

The government ensures that instructional models use materials that are accessible to and meet the individual needs of children through the IPP and Treatment Plan. The DNA also specifies that the developmental needs of each child must be met.

Parent/Family Participation

Ontario legislation and policy require that families are fully involved in decision-making with regard to services. This philosophy drove the "Making Services Work for People" initiative. Both the DNA and the special needs resources require that parents are involved in planning and decision-making with regard to their child. Provincial regulations, guidelines and standards protect the rights of children and their families to be involved in the IPP. If a children's treatment centre or a resource teacher program is involved, they have to follow a specific planning process that involves parents.

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[26] As reported in *The Toronto Star*, 17 September 2002, p. B1.

Planning the delivery of services, supports and resources and the development of government system reform, standards, policies, etc., happens at the local level rather than being government initiated. Parent participation would be encouraged as part of service planning. The government does not monitor or facilitate parent involvement in general planning or evaluation exercises. If this happens, it would occur at the local level.

Program Accommodations

While there has been considerable discussion in the field about it, there is no accreditation of inclusive child care centres in Ontario. Current regulations (i.e. licensing) require a minimum standard.

The government ensures that instructional/program flexibility is available to meet the individual needs of children through the DNA, IPPs and Special Needs Resourcing.

Program shortcomings are identified and addressed through the regulations and the IPP.

While the government does program evaluation, local variables (e.g. cultural diversity, parent/child perspectives) would be identified at the local level.

Staffing

Under the DNA, child care centres are required to have qualified staff. Inclusion is addressed as part of ECE training. When hiring a special needs worker, resource teacher programs and centres would be expected to hire someone with appropriate training/qualifications.

The government would not be involved in the human resource policies as outlined in the benchmarks. These practices would be the responsibility of the individual centre or the delivery agent. The same would go for ensuring dissemination of information about inclusion, best practices, and monitoring/evaluation of staff.

Services

Under government policy, comprehensive interdisciplinary services are provided for children with disabilities. These may or may not be provided in the child care centre itself. Legislation and guidelines stipulate that family supports, service coordination, transition planning and other practices are determined by the needs of the child and family rather than by other criteria such as age. The government also ensures that IPPs are conducted regularly, and are used to determine what services are needed. Monitoring and evaluation frameworks examine the flexibility, coordination and planning of services including transitional planning and coordination to ensure that the needs and rights of children and families are met.

Manitoba

Participation of Children with Disabilities in Child Care Programs

In Manitoba, all child care centres that receive grants are expected to include children with special needs. This expectation is reinforced by the *Community Child Day Care Standards Act and Regulations*. Exclusion has not been raised as an issue in many years as the child care system in Manitoba has never been a segregated one.

The government provides a range of child care models supportive of children with special needs in both urban and rural settings provided that the child meets provincial criteria for service.[27] There has been no government initiated public education regarding the inclusion of children with special needs. Any public education would be done at the local level.

Centres are asked to look at the needs of the child to determine whether extra staff is necessary. While expectations and supports are in place for inclusion to be successful, there are waiting lists for staffing grants, though emergencies can usually be accommodated.

Licensing staff monitors inclusion practices. A review meeting is held at least once a year with regard to grants. The government has a computerized system that keeps track of the number of children in child care.

Parents are eligible for the regular child care subsidy, as well as an additional subsidy for children with special needs. There are 10,964 children with special needs and 61,070 children receiving subsidies in regulated care (Child Care Resource and Research Unit 2001).

Environmental Accommodations

Current accessibility legislation does not apply to child care centres. The government is in the process of reorganizing. Under the new structure everything concerning disabilities will be moved to the Persons with Disabilities Division. It will serve people with disabilities from birth to death. The Minister of Family Services and Housing is also the Minister of Persons with Disabilities Division. It is anticipated that under the new legislation, child care centres will be included.

All new buildings must have certain accessibility features (e.g. washrooms). As many child care centres are on the ground floor and/or in schools (that are subject to accessibility requirements), in practice, accessibility has not been an issue. Where feasible, children at the preschool level with mobility challenges can be carried, if the facility is multi-levelled.

There are no special curricula — these would be developed by Children's Services so that goals can be achieved within the child care environment. The expectation is that the individual needs of the child will be met.

The government does not "ensure" budgetary supports for the accessibility of buildings, furniture and equipment and for disability supports, including assistive technologies for classroom use. This is largely because although there is an equipment grant, staff have not been able to use it for accessibility due to the demands of staffing which uses the bulk of the funding. Families access funding for equipment or physical renovations through Children's Special Services and/or foundations. Parents of a child with a disability can use an additional exemption that could affect the per diem cost of care.

Monitoring and evaluation frameworks do not include measures on compliance with provincial building codes and other physical environment regulations and guidelines.

Parent/Family Participation

There is a legislated requirement that if a centre is receiving funds, it must have a board of directors, which includes parent users.

While there are no regulations or legislation in place that protect the rights of children and their families to be involved in decision-making concerning IPPs, it is required as a matter of policy and standards. Reportedly, the whole system is based on a team approach from the moment a child's disability is diagnosed and a case conference is held to identify what resources are needed at home or at a child care centre. The parent is a part of the team from the outset and is directly involved in all aspects of planning and the setting of goals for the child. There is an appeal process if a parent is turned down for a subsidy.

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[27] Supportive child care is provided for children with cognitive, physical, or developmental delay, as well as children with behavioural problems or medical fragility.

Parents are involved in service delivery planning, government system reform, policies, etc. at three levels: the board of directors, the planning team and the province-wide Regulatory Review Committee that advises the Minister of Family Services and Housing. While no funds are provided for transportation, child care etc., there is an attempt to minimize out-of-pocket expenses, for example by setting meetings for times when participants do not have child care needs.

Parents/community members are also involved in program design, monitoring and evaluation exercises when it comes to their own children, but not when it comes to the system.

Program Accommodations

There is no prescriptive government policy specifying inclusionary practices, child/staff ratios, assistive technology, etc. Instead the child's needs are identified, and then resources are provided to accommodate those needs. Grants are not approved for "silo" programming. There has to be an articulated rationale for an individualized program, but even in that case, the objective is nonetheless to ensure that the child is fully included. The grants for children with disabilities cannot be used to meet the legislated child/staff ratios — that is, staffing must be enhanced if additional funding is going into a facility to support a child.

Like other provinces, there is no accreditation of child care programs, only licensing which demands a minimum standard. Government regulations require a variety of instructional models to ensure that the needs of all children are met.

If program shortcomings and/or issues are identified through a review process, it is up to the centre to use funds from the regular operating grant to address them. Where the centre is in violation of the regulations, it would be required to develop a plan to correct the situation.

Staffing

There are no policies, legislation, or guidelines with regard to staffing and inclusion. However, normally two-thirds of a centre's staff must have an ECE diploma. There is a specialized diploma related to children with special needs. While a significant number of staff have acquired this diploma, it is not a requirement. The government has tried to allow the centre to determine what the staffing need is for the child with special needs. The centre is allowed to hire someone without formal qualifications, if it is determined that all that is needed is an extra set of hands. The budget includes $7.8 million for extra staffing for about 1,000 children with special needs at any given time, or 1,500 children in the course of a year, taking staff turnover into account.

There is no mechanism per se that facilitates a wider dissemination of inclusion best practices; however, there is a committee that reviews all training programs for ECE including the Certificate for Special Needs program. There is also an advisory committee with community representation, including parents, for the Special Needs Certificate program.

Monitoring and evaluation does not separate out children with special needs. The centre is monitored for its compliance in meeting all children's needs.

Services

Government policy requires the provision of family/child-centred comprehensive interdisciplinary services for children with disabilities in child care programs. These services are provided for the child through Children's Special Services regardless of where the child is, i.e. whether the child is at home or in a child care facility. There are no legislation nor regulations that ensure that family supports, etc. occur in response to family and child needs, rather than the age of the child. There are guidelines/standards involving a province-wide protocol that directs such things as coordination, transition planning and other practices. The regular use of IPPs is a condition of funding. Based on the IPP and specific criteria, the government provides full funding of support services. There is a monitoring process fully in place that examines the flexibility, coordination and planning of services including transitional planning and coordination to ensure that the needs and rights of children and families are met.

Saskatchewan

Participation of Children with Disabilities in Child Care Programs

Saskatchewan has no legislation or regulations prohibiting the exclusion of children with disabilities from child care centres, or ensuring that parents caring for children with disabilities have the same level of access as any other parent. Instead, the government is aiming to facilitate inclusion, i.e., to provide supports to make inclusion possible… Centres that struggle to provide quality care to typically developing children are not expected to care for children with additional challenges, unless it is clear that they are able to provide an adequate level of quality care to children with special needs."

To improve centres' abilities to include all children in their programs as well as the quality of care, four centres were involved in testing an on-site consultation model as part of the *Keeping the Door Open* research project. This was one of the actions initiated following the Special Needs Child Care Review.

Saskatchewan's Child Development Program was established in 1975 as part of the Social Services' licensed day care program to ensure that children with "high needs" in the areas of emotional, cognitive, or physical development would have access to licensed child care spaces. The purpose of the grant was to offset the costs of extra services or staffing the child care centre would incur by providing care for the child. The maximum amount provided a month is $300.00. While not everyone gets the grant they need when they need it, the support is largely in place. There is no waiting list and very few applications have been denied; however in some cases it is difficult to access an outside referral to support the application, particularly in rural or remote areas. As a result of the Special Needs Child Care Review, there are several new programs being piloted. "Enhanced Accessibility" is a new program intended to remove the barriers that parents of children with exceptionally high needs face in participating in the work force (or school) through providing support funds for children who otherwise would not be able to access child care. The maximum provided a month is $1,500.00. A further $200.00 is available to support professional training and/or resources for the care provider. The province is also piloting "Block Funding" whose purpose is to support centres in delivering services to all children, including those with special needs, without focusing on the deficits of particular children. This program will replace the individual Child Development Grants in these centres. "Community Solutions" is a program intended to allow programs the opportunity to design and deliver programs specific to their own community needs.

Under the Child Care Subsidy Program, up to 90 percent of the child care fee for low-income families is subsidized, providing that the fee is below the maximum rate. Because many centres charge higher than the maximum rate the government will fund, in reality according to a government report, the maximum amount of subsidy paid is well below the 90 percent rate. Low-income, fully subsidized parents pay an average of 35 percent of the full fee. There is no waiting list for licensed spaces, even though there are only enough spaces for 5 percent of Saskatchewan's preschool children. As of 2001, there were 444 child care facilities with 250 children receiving additional supports.

An accountability system is effected through the licensing renewal process. The government keeps some limited statistics on all children. The government is working on a common functional assessment tool for children with special needs that could be used by all systems, and thereby reduce multiple testing.

Environmental Accommodations

Government policy requires that new child care facilities have to be fully accessible to children with disabilities, but old facilities have been "grandfathered". All facilities are covered under provincial building codes regarding accessibility.

Regulations and guidelines require that the physical environment including instructional materials be developmentally appropriate for ALL children. $600.00 per year (or $1,200.00 in exceptional circumstances) is available to provide adapted equipment to facilitate the child's full participation in the program. Sometimes centres access other sources of support such as local service clubs. There is apparently substantial community support for this kind of initiative. For example, the Kinsmen Telemiracle raises millions of dollars for equipment for children with disabilities.

Monitoring on compliance with provincial building codes and other physical environment regulations and guidelines is carried out through the licensing process.

Parent/Family Participation

The government ensures parent/family participation in decision-making and the development of the IPP by meeting with them and planning for their involvement, a legislated requirement of the grant process. Also required is the involvement of a professional in the planning process. The government further protects the rights of families by conducting an anonymous survey. Nonetheless, parents could be intimidated into accepting something they found unsatisfactory because of the limited availability of spaces. Accordingly, new initiatives are being considered that will make care more accessible to families with children with diverse abilities.

Saskatchewan is working towards greater involvement of parents and community members in planning the delivery of services, development of systems and policy reform, etc. Flexibility in grants allows funding of out-of-pocket expenses such as transportation. The centre would provide child care.

The government tries to involve parents as much as possible in program evaluation and to respond to children's individual needs. Saskatchewan is one of the few places that allows children to stay in child care until they are 13 years old, or 15 under exceptional circumstances for children with special needs. The government is also working on finding a child care solution for children who are older or for whom child care is inappropriate.

Program Accommodations

Government policy requires that child care programs reflect recommended practices with regard to inclusion, child-staff ratios, group size, caseloads and safety — but not assistive technology.

There is no accreditation of inclusive child care centres.

The government ensures multiple instructional models are available to meet the individual needs of children as part of child care regulations and guidelines.

Program shortcomings indicated by evaluations of program delivery, and child and family outcomes get addressed and lead to necessary improvement/changes in the centres involved in the *Keeping the Door Open* pilot project. The government realizes that this needs to be expanded and replicated throughout the system.

Although there are program evaluations, they do not take into account demographic differences as indicated in the benchmark.

Staffing

Saskatchewan does not have a specific policy requiring different qualifications for ECEs working with children with special needs. They have, however, in the wake of the *Special Needs Child Care Review*, set as a priority a training program — "Preparing for Inclusion" — to support early childhood educators and communities to be responsive to the principles of inclusion.

The government has also enhanced the wages of child care workers. It is anticipated that this in turn will have an impact on the kind of trained staff that a centre can attract and retain. While other personnel requirements are not explicitly addressed through regulations, they are addressed through training. In other words, they are an expectation, albeit indirectly so.

Flexible staff models, scheduling, etc. based on local needs, are beginning to be promoted and facilitated through the Community Solutions program, now being piloted.

Best practices in inclusion are being promoted through the training program, as well as a quarterly newsletter — *Partnerships for Inclusion* — that provides updated information on new directions in inclusive child care as well as resource information on specific topics.

Compliance with inclusive program and teaching practices is monitored and evaluated. Child care licensing consultants are quite involved with children in inclusive programs. They carry out ongoing drop-in visits to ensure the children's needs are being addressed. As well, families call the licensing consultant to discuss a situation and, when necessary, to raise particular concerns that the consultant will then ensure are addressed.

Services

The Child Development Program Review notes that the range of services available to young children varies in communities across Saskatchewan. Accessibility to services often is limited by availability and/or parents' ability to pay. The report quotes Saskatchewan's Action Plan for Children: Building on Community Success – Creating a Long Term Plan for Saskatchewan's Youngest Children and Their Families:

> *While many of these programs and services are excellent, services have often developed on an ad hoc basis. In many cases, there is limited coordination and integration of programs and services. Access to services is frequently dependent on where families live. Even in locations where there are a variety of services available, children and families at risk who most need additional supports may not access them.*
>
> *Service fragmentation has been an unintended consequence of the traditional delivery of human services…Difficulties in the integration of services and communications among multiple service providers may contribute to limited success in helping families meet their objectives.*

The Review notes, "This lack of consistency in programs and services, combined with the increasing need for early childhood programs, has placed increased pressure on the licensed child care sector." This, in turn, resulted in problems that were reflected in the Children's Advocate receiving multiple complaints from families having difficulty accessing financial support so that their children with special needs could attend child care.

While provincial regulations refer to family supports, service coordination, transition planning and other practices occurring in response to child and family needs, in practice Saskatchewan has some distance to go, particularly in rural areas where it is more difficult to attract other professionals.

Government policy (i.e. the grant process) requires that IPPs be used on a regular basis to determine the type and amounts of services and desired outcomes. Some funding is provided through Community Solutions to assist in the funding and coordination of interdisciplinary/interagency services for children with disabilities in ECD programs, such as speech and language therapy, physiotherapy and links to other systems such as schools, social services, etc., but it is not enough to meet the entire need.

Although the coordination of services, transitions to schools, etc. works very well in some communities because of the individuals involved, there is no government requirement or monitoring mechanism to ensure that the needs of families and children with special needs are met.

Alberta

Participation of Children with Special Needs in Child Care Programs

In Alberta, there is nothing in policy, legislation, or otherwise that requires a centre to accept a child with disabilities. If the centre feels it is unable to meet the needs of a particular child, it can reject him/her. Nonetheless, there has been an "Integrated Day Care Program" since 1982 (now called the Inclusive Child Care Program) which supports children with disabilities attending inclusive child care programs. In 1999, responsibility for all children's services was transferred to 18 regional Child and Family Service Authorities (CFSAs) that have a contractual responsibility to continue supported child care. The philosophy of inclusion is demonstrated in the policy manual for Day Care Services, Edmonton Region, entitled, Integrated Day Care: Regional Guidelines. Its stated objective is:

> *To provide an inclusive child care environment for children with special needs in their own community… Children with special needs should have access to the same types of experiences as children without special needs, but may require extra support in order to be included with their peers.*

Parents who want their child to attend a local child care centre which staff do not consider an inclusive program, however, are directed to an approved inclusion program. A centre not approved as an inclusion program may not receive support funding for a child with special needs.

The government does support a range of child care models in both rural and urban settings. There is no public education program focused on inclusionary practices. Rather, there is an expectation that such standards will be met. Alberta has a Web site that centres can access for information and updates.

The government ensures that children with disabilities are able to participate fully in approved inclusion child care programs[28], that barriers are identified and addressed and that budgets, supports and resources necessary for their full inclusion, including child care subsidies for low-income families, are provided. If a child with special needs is referred to child care for the purpose of socialization, he or she will be subsidized. Extra resources for a child with special needs attending child care are not determined by family income. Any cost sharing reportedly is done on a voluntary basis.

Child care programs are monitored through the funding process which requires quarterly reports. No data on diversity and the number of children with disabilities in child care are kept. There is a child care information system. There are 10,490 children receiving child care subsidies in Alberta (Child Care Resource and Research Unit 2001).

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[28] In addition to inclusive child care programs, Alberta has an early intervention health program for children with special needs. As well, Alberta Learning has a program unit for children with severe disabilities.

Environmental Accommodations

Provincial building codes and accessibility legislation apply only to the issue of evacuation. In fact, a child could be excluded from a program if the centre could not safely evacuate the child in the event of an emergency.

There is some regulation of environmental requirements, for example, space per child, under the Day Care Regulation. Many centres use the ECERS-R Scale. A centre could be issued a notice of non-compliance, if there is a concern that the needs of a child with a disability are not being met. There is a designated percentage of child care centres that must meet the developmental needs of children for the ECERS-R Scale.

The government requires that instructional models meet the needs of individual children. Funds are provided for assistive technology and program needs of children with special needs. Compliance with physical environmental requirements is monitored through the licensing which has to be renewed every year.

Family/Parent Participation

Though not specific to child care services, Alberta Child and Family Service Authorities are required to have community-based boards of directors. The province is moving towards the implementation of family resource centres. The early intervention program for children with disabilities and/or developmental delay is family-focused.

There are no regulations with regard to IPPs, but guidelines governing the Resources for Children with Disabilities (RCD) program require that resources be negotiated with the family involved based on individual need. The whole program is based on a philosophy of family involvement. In one program designed for autistic children and children with complicated medical needs, ministries are working together to facilitate parental involvement and access, in order to make it easier for them.

Community participation/family involvement is one of the four pillars of the CFSA model. Coverage of out-of-pocket expenses is decided at the local level, and is therefore somewhat variable. If a parent is involved in ongoing work, their costs would be covered. To a degree, parents are actively involved in program design and evaluation exercises. There is variation across the province.

Program Accommodations

Alberta is currently developing a child care best practices document that talks about children with special needs.

There is no accreditation process in place. The only eligibility requirement that centres must meet is that the child care program supports an inclusive environment and provides a developmentally appropriate program. The government does ensure that a variety of instructional models are in place to meet individual needs. Program shortcomings are identified and addressed through the development of a business plan and the ECERS-R Scale and regular comprehensive evaluations that take into account local variables and parent/child perspectives.

Staffing

There are no formal qualification requirements for child care staff to ensure the inclusion of children with special needs. Nor are there government regulations or guidelines governing personnel practices. However, the government is working towards ensuring flexible staffing models that are able to accommodate local needs (e.g. shift workers).

Regular monitoring by Children's Services staff and a yearly formal evaluation enforces compliance with inclusive program and teaching practices.

Services

There are no regulations or legislation governing eligibility criteria for family supports, service coordination, transition planning and other practices based on the needs of children and their families rather than on the age of the child.[29] However, guidelines under the RCD program outline transition planning, criteria for support, etc. according to the needs of the child.

While Alberta policy does not require the delivery of interdisciplinary services in child care centres, in practice they are provided in the centre with no cost to the parents, although there may be waiting lists. The government ensures that IPPs are used on a regular basis to determine the type and amount of services and desired outcomes. RCD does formal evaluations to ensure that children's needs are being met.

British Columbia

Participation of Children with Disabilities in Child Care Programs

While British Columbia has nothing in place to prohibit the exclusion of children with disabilities from a child care centre, during the late 1990s the province made a significant transition from largely segregated child care for children with special needs, to a more inclusive model known as "Supported Child Care". In the *Practice Guidelines and Procedures for Supported Child Care* (SCCP) (1999) "inclusion" is defined in the preamble as:

> *An approach to providing service in which children are welcomed, supported and valued. It means that the activities of playing, learning and growing happen in a way in which all children feel that they belong. It does not mean that there are no challenges — rather it means that the child is in the best environment to experience success. It does not mean that every child does exactly the same thing at exactly the same time. All children have different abilities and aptitudes; an inclusive setting accommodates and builds on those. Effective inclusion is a process.*

While this document provides guidelines for government staff, the final decision as to whether to include a particular child is made by the child care centre. The Supported Child Care program is currently under review.

Although not required, the province does provide a range of child care models. Some education about inclusion is provided through the Web site and a pamphlet. An Early Childhood Education public education initiative, which includes information on inclusion, has been started. There is some effort to address program fragmentation, and to provide a continuum of programs through forums, advocacy groups, and conferences, but these efforts are not specific to inclusion. The government of B.C. is also working on a new, comprehensive plan for child care services, involving collaboration between a number of partner ministries, and including consideration of the Supported Child Care program.

To ensure access and remove barriers, every parent of a child with special needs has the right to apply for Supported Child Care. The SCC consultant, who is funded by the Ministry of Child and Family Development

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[29] The Alberta Day Care Regulation defines "child" as under the age of 7.

(MCFD), acts as a mediator between the parent/child's needs, and the capacity of the centre to meet them. The consultant will also be available to assist with staff training.

There are policies, practices and mechanisms to facilitate the process of inclusion. Although there has been a strong move towards inclusion in B.C., the emphasis has been on shifting attitudes through providing education and support, rather than by any form of coercion. If the centre and the SCC consultant are in agreement that more staff is needed, either part- or full-time aide support may be funded. Families may need to be waitlisted, depending upon availability of budget. All low-income parents in B.C. can apply for a child care subsidy; low-income parents of children with special needs can also apply for an additional small subsidy, to assist with the cost of the basic space fee. Extra supports, such as staffing, are not income-tested. In British Columbia, there are approximately 6,200 children with special needs in regulated child care. An estimated 18,500 children in regulated care receive subsidies (Child Care Resource and Research Unit 2001).

In Vancouver, there is a Placement Review Committee in place that assists with child care placements. SCC funds supports required as well as the child care consultant who works for the individual agency. If a child needs ongoing staffing, the staff might be hired by the centre but funded by SCC. The staff would remain in the centre to care for the child with special needs as well as other children.

There is no monitoring system with regard to inclusion.

Environmental Accommodations

The Community Care Facility Act (2002) governs all situations involving people dependent on care. It stipulates what is required in the physical environment, although it is not stated in terms of inclusion. The B.C. Building Code accessibility requirements include child care locales. While there is no stipulation regarding instructional materials, there is a general expectation that all children's individual developmental needs are to be met. If the Community Care Facilities Act and Regulation (Ministry of Health Planning) requires physical supports, some capital funding is available from the Ministry of Community, Aboriginal and Women's Services (MCAWS). Monitoring of compliance with provincial building code requirements is fully in place.

Parent/Family Participation

A family-centred approach is one of the central tenets of the Supported Child Care Policy, which is based on the following principles outlined in the Practice Guidelines and Procedures:

- Families know their children best.
- Families are the most important and constant factors in children's lives. Their strengths, stability, history, culture and dignity are respected and form the foundation for services.
- Families have the right and responsibility to make choices for their children.
- Families and professionals work as a team.
- Coordination and planning are essential in managing transitions and ensuring a continuum of appropriate service.

While there is no legislation in place, the Practice Guidelines and Procedures for Supported Child Care sets out what might reasonably be expected of an individual program plan, done in collaboration with the Supported Child Care consultant, the family and other professionals. A two-part Support Guide may be completed initially to assess level of support need, and parental goals for their child (one part completed with the family, and a second part completed with the child care centre staff). The Support Guide can be used as a benchmark and for regular re-evaluation of support needs. As well, the guidelines indicate that an Individual Family Support Plan may be developed and reviewed semi-annually. There are mechanisms in place to ensure family participation.

In support of parental participation in broader planning, the government may provide some funding support to enable parents to attend advisory or program planning meetings. Whether parents and community members are actively involved in program design, monitoring and evaluation exercises varies from community to community. If licensing monitoring is taking place in a particular centre, families would be part of it. If a review is undertaken as a result of a complaint, families also would be involved. Some communities have SCC advisory or steering committees with cross-sector representation. There is a Quality Assurance Policy and Internal Complaints process that families can access. If that does not have an outcome satisfactory to the family, a complaint can be made to the Ombudsman.

Program Accommodations

Though not fully in place, government policy to some degree requires that child care programs reflect recommended practices with regard to inclusion. British Columbia is also developing an accreditation process for child care centres in general, but not specific to inclusion. Government policy speaks to instructional models that recognize the individual needs of the child. There are no mechanisms and/or budgets to ensure that program shortcomings are identified and addressed. The Ministry of Health ensures compliance with basic standards, but it is not mandated to evaluate or improve the quality of programming. Program outcomes would not be reported to them.

Staffing

There are three levels of early childhood educator certification: 1) basic - early childhood educator; 2) early childhood educator with a specialty as an infant/toddler educator, and/or 3) special needs educator. Information on inclusion of children with special needs is interwoven through all programs.

Regulations stipulate that:

> *To qualify for a certificate to act as a special needs early childhood educator, an applicant must:*
>
> *(a) Have the qualifications required by section 6, and*
>
> *(b) Have completed (i) a post basic early childhood education special needs training program offered by an institution listed in item 2 (a) of Schedule B, or (ii) a program the director considers an equivalent training program. [am. B.C. Reg. 387/92, s. 3.]*

Under the Ministry of Advanced Education, B.C. is currently developing a module for a special needs consultant.

It is not entirely clear to what degree the government is involved in staffing standards as outlined in the benchmark. MCAWS assists with wages in eligible child care centres, based on staffing requirements under the Community Care Facilities Act.

Supported Child Care can be delivered in a centre or home, providing care that accommodates shift work. If care is provided in the home, then the parent is responsible for abiding by the *Labour Standards Act.*

SCC is in the process of developing mechanisms to ensure that the teaching and programs reflect what are considered current standards and best practices in inclusion. Currently, there are no monies available to support the dissemination of information on best practices.

There are no monitoring and evaluation frameworks in place that include specific measures on compliance with inclusive program and teaching practices.

Services

Family/child centeredness is the underpinning of programs and practices. Guidelines define the "Individual Family Support Plan" as "an approach in which families and professionals work to form partnerships. At the heart of these partnerships is the belief that families care deeply about their children and are best able to nurture them and make choices for them. Programs or services are built upon families' strengths in the context of their communities." However, there is no mandate to "require" the provision of comprehensive interdisciplinary services for children with disabilities in child care programs.

According to MCAWS, provincial regulations requiring that family supports, service coordination, transition planning and other practices occur in response to child and family needs, and are fully in place for the B.C. Benefits Act and Regulations (Child Care Subsidy). But according to another informant, age of the child continues to be a determinant for level of financial support. Financial support through the subsidy takes family income, number of family members and the child care setting used into account. Under SCC guidelines, an exception to provide Supported Child Care for children aged 13 to 18, can be considered based on such criteria as: parents are working/receiving training; no other support services are available; the child's needs are such that they continue to require supervision, although there is no licensed care for this age group.

IPPs and IFSPs and their requirements are defined and outlined in the SCC guidelines. The SCC consultant draws up a service plan. If the family is getting SCC plus a "basket" of services from other ministries, then there would be an additional plan (e.g. if there is a nurse there would be a nursing plan). Families are required to pay for the child care space, but not the services.

Monitoring and evaluation of the flexibility, coordination and planning of services and effectiveness of services in meeting the needs of children and families, is fully in place, according to government staff. There are "target" plans for some disabilities (e.g. autism) that require specific transition planning.

Further Comments

When the benchmark survey was undertaken in British Columbia, child care and related programs were undergoing a major transition under the new government. Various aspects of child care currently come under the auspices of different ministries, with the result that no one person interviewed knew the answer to all the benchmark questions, nor even where the information could be obtained. This gave the impression of a fragmented state of affairs. One staff person commented that the current system was very confusing for both staff and parents. Personnel from several ministries were interviewed and yet answers to some of the questions remained elusive.

Yukon Territory

Participation of Children with Special Needs in Child Care Programs

Whether a child with special needs[30] is accepted or not in a child care centre is not legislated, but determined by the child care centre itself, usually based on whether they have the necessary resources and whether they consider the program suitable for the specific child. They may take the child for a trial period and/or request assistance from the Child Care Services Unit or the Child Development Centre (CDC) to accommodate the child.

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[30] Under the Child Care Subsidy Regulation, a child with special needs is defined as "a person 16 years of age or younger, who has had an individual assessment by a qualified professional, and who has a physical, emotional, behavioral, mental, developmental, communicative, or other identifiable and recognized disability."

Once a child is accepted in a centre or family day home program, regulations under the *Child Care Act* (4) require that the child is "integrated with the other children as much as possible".

The government helps to fund a range of service delivery models. In particular, it has placed a significant focus on children with foetal alcohol syndrome, including a public education campaign.

One of the stated principles of the Supported Child Care Program is that "every child has a right to a program that has been developed to meet his/her needs". To this end, the Supported Child Care Grant can be used to fund additional staffing (i.e. full-time if necessary); physical and equipment improvements; specialized services (e.g. transportation, staff training or professional services for the child); and reduced child/staff ratios.

Funding is determined by the child care inspector's review of the IPP. Data are kept on the number of children with special needs cared for each month. In the most recent data, child care centres cared for 25 children with special needs (out of a total of 631 children). Out of 321 family day homes, there was only one child identified with special needs. While there are probably more, centre directors don't like to make formal identifications because of the associated workload, (i.e. IPPs).

Environmental Accommodations

Under current building codes, any new buildings for centres are required to be accessible. Existing centres may have to upgrade and may do so with the assistance of a local service agency, Supported Child Care Fund, or a Health and Safety capital development grant.

The regulations state materials have to be developmentally appropriate for each child.

The government assures that budgetary supports are available to ensure accessibility of buildings, furniture, equipment and for disability supports, including assistive technologies for classroom use through the capital fund. The centre may also be eligible (based on the IPP) for a Direct Operating Grant. In addition the child care subsidy allows an additional $50 for a child with special needs. Any renovations are inspected as part of the licensing process.

Parent/Family Participation

Not-for-profit centres are required to have a board of directors. Commercial centres and First Nations centres are structured differently. There are regulations, 20(1)(a) and 20(1)(b), specifying that parent/families be involved in planning for their children. The regulations have specific clauses. For example: "Child/staff ratios and group sizes for children with special needs must be determined on an individual basis in consultation with parents, staff, and professionals in the community." Guidelines for IPPs are in draft form, but widely used. Parents are involved in the development of IPPs and have to sign them in order for them to be valid. Parents are involved in program design, monitoring and evaluation exercises through not-for-profit parent boards, First Nation-run boards and in feedback/evaluation exercises and possibly, at staff meetings.

Program Accommodations

Government policy does require that child care programs reflect recommended practices with regard to inclusion, child/staff ratios, group size, safety and assistive technology. The program includes an anti-bias curriculum. There are no regulations with regard to the accreditation of inclusive programs, although consideration was given to this at one point.

The Yukon was one of the pilot sites for the *Keeping the Door Open* project.

Service delivery models are flexible, facilitating the meeting of individual needs of children and the accommodation of the IPP requirements, per the regulations.

While there is never enough money to meet the needs of children with special needs, where program evaluations or the Child Development Centre indicates program needs or shortcomings, application can be made to the Supported Child Care Program for additional funds.

Programs are monitored, usually every three months. As the population is very diverse — that is, First Nations children, different family groupings and diverse cultures and languages — this is taken into account in monitoring systems.

Staffing

There are regulated educational requirements for child care workers. The Early Childhood Program at Yukon College includes training on special needs children and inclusion. In addition, conferences that include the topic of inclusion are held every two years for all child care workers.

Employment practices (e.g. hiring, retention, salary, workplace safety, etc.) that relate to inclusion are not governed by legislation, regulations, or guidelines. This is up to the individual centres.

Compliance with inclusive program practices is monitored through spot inspections, feedback from parents, the IPP and its related funding. If the inspector finds evidence of non-compliance with the IPP, a non-compliance order could be issued, and this might affect funding.

Services

Government policy requires the provision of family/child-centred comprehensive interdisciplinary services for children with disabilities in child care programs.

Child care legislation covers children up to the age of 12, and up to age 16 where there is a special need. There are no supports in place after this age, other than community organizations. The Child Development Centre ends its involvement after the child goes to school. Until that time, all services, policies and procedures are based on the child's needs rather than age.

The Child Development Centre monitors the IPP and Child Care Services inspectors to ensure that appropriate services are in place.

Monitoring and evaluation of services including transitional planning could be improved, although child care personnel do work with the school/kindergarten with regard to the IPP during transition planning. It was noted that once children with special needs are school-aged, they are no longer served by the Child Development Centre (CDC), and are more difficult to track. They are still required to have an IPP, however, otherwise an order of non-compliance would be issued.

APPENDIX C
Interviews with Non-governmental Experts

Interview with Non-governmental Expert, Province 1

Participation of Children with Disabilities in Child Care Programs

How has legislation/policy (or its absence) requiring the inclusion of children with disabilities affected practice?

> *I don't see any children being refused by centres, but centres are recognizing the limitations of what they can offer and they are conveying these to the families. There are several programs that are not accessible at all, and a child with limited mobility has to be carried up and down the stairs. Parents have the right to choose what is best for their child, and they do have the same range of options as children without disabilities.*

Are the supports for children with special needs adequate in your opinion?

> *Pretty well. But I've seen programs where attendance is part-time due to lack of funding for supports and if there were supports the child would probably attend full-time. Part of the funding process involves case planning every six months. This makes everyone accountable. This is part of developing [service plans] and funding criteria. But it's not part of legislation.*

What could be done to improve access?

> *Part of what we are doing right now, is using ECERS - R. It provides centres with a strong framework of what inclusion should look like. One of my recommendations is that centres have a strong framework so that we don't just have pullout programs, or support glued to the individual child, but the child is working towards independence. I am looking at how centres can use resources better. Some centres are doing this well. I would like to see all centres with this framework.*

Do you feel that child care centres have had an affect on policy in this area?

> *The [provincial child care association] has been partnering with so many agencies, and meeting with the government and MLAs. They have been fabulous. What we see is attention to the issue of recruitment*

and retention. It lets everyone know how important it is to invest in our children. Raising salary levels and standards, and making sure educators keep up training and knowledge of best practices will affect inclusion. Salaries are the key issue for recruitment and retention. They haven't raised salaries yet, but are working towards that. Some centres have raised salaries on their own through increasing fees. This may make it difficult for parents, or discourage them from using the centre. What concerns me is that the people hired for children with special needs often have no qualifications and no knowledge of typical child development and milestones.

Environmental Accommodations

How has legislation/policy affected practice?

There is no money for modifications. This is left up to the initiative of local professionals who may bring in some equipment. Any centre I've worked with seems to have been able to find equipment that they need. What I do see is some centres not making minor modifications (e.g. handrail in the washroom). What we've been doing is using ECERS-R, and when they see that they are stopped in their assessment by the lack of accommodation of children with disabilities, (e.g. child not being able to sit at the table because of the level of table and chair) with assistance they are more willing to make the modification. The same thing is true of playground equipment. Generally playgrounds are made for children who are very mobile. As of now, there is no modification. This needs to be reviewed in the future.

Is the policy adequate in your opinion?

Not necessarily, particularly with needed minor modifications. Understanding has to evolve over a period of time, which is being fostered through the ECERS-R and the Canadian Supplementary Inclusionary Scale(CSIS) [developed by SpeciaLink for You Bet I Care!] that consultants are using. Education of educators for children with special needs is important. There needs to be a strong framework of education levels, ongoing training requirements and a strong support of resources for all children, families and educators.

What could be done to improve physical and program accommodations?

Minor modifications. Modifications/adaptations to playgrounds. Physical accessibility. All these things require money.

Are the resources adequate, in your opinion, to facilitate the accommodation of children with disabilities?

No.

Is the monitoring adequate?

For new centres starting on, these are things they have to do. Monitoring is probably not adequate for everybody.

ECERS-R is more of an empowering tool, rather than a monitoring tool. Government uses individual scores only when the centres are not meeting overall regulation and are not working toward change. We are encouraging centres to move toward best practice. We are providing centres with training, staff meetings and individual support for their journey. Overall scores are given to the government to indicate how centres are moving toward best practice. This includes an initial baseline observation with the supervisor and then a second observation later in the project (about six to eight months after implementation of first baseline scoring). Scores are then compared within the seven subscales of the tool (space and furnishings, personal care routines, language and reasoning, activities, interaction, program *structure, parents and staff). We report to [the provincial child care association and the ministry responsible for social services] on the work of the project on an ongoing basis.*

Parent/Family Participation

How does policy in this area affect practice?

> *Parent participation is quite good. Because of small communities, it's easy to maintain communication. It's not too busy. Maybe with legislation, it would better position parents to act more as advocates for their children. Maybe if there were guidelines that laid out what should happen as the child ages. I don't know whether parents are consistently making the connections they should be making while the child is younger (i.e. transition planning). Centres are not equally knowledgeable about resources and where to link up families. Some centres are fabulous, while others are struggling.*
>
> *Parents and centres are involved with the special needs team in two regions of our province. I hope that changes and grows so all families and centres have this same approach.*

What could be done to improve policy in this area?

> *See above — if things could be put in place right at the outset when a child is diagnosed with a special need.*

Program Accommodations

How does policy affect practice in this area?

> *I mentioned earlier that not all staff has the background to set up [service plans]. The way the funding works, you can't use extra staffing to reduce ratio. A lot of people interpret this as meaning that the extra worker is there for that one child, resulting in too much shadowing. What we're trying to do through ECERS-R is to modify the use of resources so that the special assistant is integrated into the whole program, so that one cannot tell who the assistant is. There is not a strong knowledge base among special needs assistants across [the province]. There is a problem with the title, but the special needs assistants need a better definition of job requirements and need better training either through the college or through workshops and in-service. Right now, some programs base what the special needs assistant does on outside professionals, rather than the needs and program of the centre as a whole. I am concerned about this, because educators should be valued as a strong contributor to the team. We have been working with ECERS-R to improve the environments so that all children's needs are met. I would like to see ECERS-R extended so we can build on the work happening for our children with special needs and for the typical children in the programs also.*
>
> *Ongoing certification requires 30 hours of training through the college, or workshops recognized by the [provincial child care licensing board]. Quite often special needs assistants are not certified. It's up to the centre director to ensure that they get at least 30 hours of training (which doesn't go towards certification). There is little incentive for them to do that, as it is not monitored, and the turnover of staff is so great.*

Are the program accommodations sufficient?

> *Centres are doing the best they know. I haven't delved into program plans too much... They could be doing things better (e.g. use of special needs assistants). Probably not, but I'm not in a position to really say. We've been using the Canadian Supplementary Scale - Inclusionary Scale. So far we've been talking with centres about this and making a few modifications. We're still in the developmental stage; all this takes time.*

Are the monitoring mechanisms sufficient?

> *Centres are required to work with whoever is involved with the child.*
>
> *I'm concerned that once the ECERS-R project is finished there will be no one to work with the centres on the issues we've been working on, i.e. quality of programs, best practices.*

In what way have child care centres affected policy in this area?

> *We haven't had an impact yet, but I think that's changing. People are starting to realize what's required to effect change.*

Staffing

How does policy affect practice in this area?

> *I thought the benchmarks in this section were fabulous. Through ECERS-R we have been doing some of this. We've been doing team-building where people have started to take responsibility for their work together as a team, identifying team values, framing their philosophy into their daily work, etc. It's been a wonderful process. I really liked that all those pieces were laid out in the benchmark, for example conflict resolution. There is no policy in place for this, but it would be wonderful to have.*

Are centres generally happy with the policy in this area?

> *I think the staff doesn't realize that there can be more concise staffing policies. Through ECERS-R they are learning that it can be important. I think that's something that centres have been struggling with. Even with something as simple as writing up a philosophy. They are so busy with day-to-day tasks that they don't see that a strong framework is what keeps it all together. Part of applying for a licence, is that you do have to have a personnel policy and philosophy statement, written policies, etc. but these are not necessarily communicated with the staff. Everyone is not necessarily on track with the same knowledge and understanding (e.g. discipline). This is something that shows up in the ECERS-R observation.*

What would you do to improve what is happening in this area?

> *Maybe something else that needs to be developed through the licensing process, is to have job descriptions, and to have an orientation package for staff that lays out everything for them. They would appreciate having the boundaries clear. Maybe that could include values, beliefs, and why we do what we do. When I go through the philosophy with the staff, I go over stakeholders. I think what needs to be included is not only their role with regard to the children, but also their role in relation to families, providing services to families, and making the connections to the community. They need to understand that it's not just a job, but you are part of the community. This gives them ownership of what they do. That includes inclusive practices.*

How have centres affected policy in this area?

> *The [provincial child care association] is working towards that. There is a strong advocacy parental group for autism, but this doesn't carry over to other disabilities. As I've gotten to know Sharon Hope Irwin, the CEO of SpeciaLink, more and more, I learn more and more about inclusion. And I've been working in this area for 20 years. I think we do need policy/legislation to ensure a consistent framework and understanding for everyone. Having policy in place makes practical sense. It would improve things and create consistency in what is provided for all children.*

Services

How does policy affect practice in this area?

> *There are special needs teams in two regions that include at least two therapists/professionals. There is one [service plan] developed using an interdisciplinary approach. I'm hoping that there will be special needs teams in all ... regions. We need something comprehensive that centres can work with. The special needs teams have been working very well and have been very beneficial for centres.*

Is the provision of services adequate?

> *No. We don't have enough speech therapists. Services particularly in [one area of the province] are not adequate at all.*

How have centres affected policy in this area?

> *I don't think they have.*

How does the monitoring process work?

> *The [organization specializing in sensory disabilities] works with children with hearing and visual impairments. They see children at least once a month. There's lots of programming and follow-up on this. Other children get regular follow-up — biweekly or monthly. Direct one-on-one occupational therapy (OT) does not happen as often. Sometimes children are taken to a playgroup at the hospital through OT or physiotherapy (PT).*
>
> *Centres have to state what services/supports are in place before they get their [special needs] funding.*
>
> *For people with autism, there is very strong support in place, including home visiting, supports, etc. This is not necessarily the case for other disabilities.*

Interview with Non-governmental Expert, Province 2

Participation of Children with Disabilities in Child Care Programs

How has legislation/policy (or its absence) requiring the inclusion of children with disabilities affected practice?

> *That's a really good question. My perception is that very few centres are turning away children. However, there may be some who do. For example, a story came to my attention from a mother who was an ECE herself. She tried to enrol her child with cerebral palsy in a part-day neighbourhood nursery school program. When she went to the open house and explained her child's needs, the director said, "Absolutely not." The director felt that being in diapers would shame the child in front of his peers. The mother reported the centre to the [ministry responsible for child care monitoring].*
>
> *There are frequently long waiting lists for children with special needs for the [funding program for children with disabilities]. We hear from families regarding waiting lists. This is actually not the reason. The real reason is a shortfall in the amount of funding support available. However, child care centres are expecting funding sufficient to hire a full-time one-to-one staff support. Not all children need this degree of support, but centres are refusing to take children with special needs without this staffing support. This is linked to a larger issue of staffing shortages. Around 30 to 35 percent of the centres are not meeting child-staff ratio and training requirements, articulated in the [provincial child*

care legislation]. Two-thirds are supposed to be trained to an ECE level, but many centres don't have enough trained staff to meet the legislative requirement. If you add children with special needs to the mix, then the centre is easily overwhelmed. If the [available funding] is for four hours a day only, the centre may refuse to take a child full-time even if that is what the family requires. From the child care community's point of view, it's not a violation of entitlement, but rather that if they take any more children, they'll explode. There's a government-sponsored recruitment drive going on right now that's supposed to address the problem.

Are the supports for children with special needs adequate in your opinion?

[The ministry branch responsible for child care] will tell you that they are spending more money per capita than any other province in Canada. It's a rich program. We also have child development counsellors who go into centres to consult. It should be a wonderful system, but the numbers of children with special needs continue to climb. There are a lot of children in [the province] with Foetal Alcohol Syndrome/Effects (FAS/E) and increasing numbers of children with Pervasive Developmental Delay (PDD). It gets back to whether inclusion means that you have to have one-on-one support for every child with special needs. That's the mindset. There should be some capacity of the child care workforce to work together to meet the child's needs. The parents see one-on-one support as their entitlement, regardless of the child's needs. Different centres have different approaches. Some centres use the extra staff to enhance overall ratio, rather than an untrained one-on-one who doesn't understand basic child development. That's closer to what we're talking about when we talk about inclusion. We have a huge piece of work to do in this area. We have to do something better with our resources. But unless we get more trained staff in the field we are limited in our ability to do that.

ECE students were instructed to ask centre directors where they are doing their practicum, if there is anything in the centre's manual or vision statement that describes how inclusion works. The students found that few centres have anything in writing. One student brought in a centre's mission statement and a completely separate piece of paper with the special needs vision. It was unclear who was given this piece of paper, all parents or just those with children with special needs.

What could be done to improve access?

Every centre should articulate in writing what inclusion looks like, so that all parents are aware of the vision. We're trying to get centres to do this.

I thought it was interesting about the public education stuff in the benchmarks. I found the government response — that it happens at the local level — unsatisfactory. They have done very little to educate the public about what inclusive child care is. If the government is not doing it, who is? Child care centres have very little money for any kind of promotion. Yet, I think it's important that people know that this is a system that welcomes children with special needs, with differences, that is tolerant. This kind of education happens best when children are young. We could do a lot more in this area. The public at large doesn't really know what's going on in child care. They need to know more.

Do you feel that child care centres have had an effect on policy in this area?

We have a strong [provincial child care association]. Almost all centres are members of the [association]. They do a lot of work with government on committees. [They] did a comprehensive response to the government's review of special education several years ago, looking at key issues (e.g. transitions to school). There is a huge amount of work needed in this area. Parents who have had a positive experience with child care hit the school system and discover that the same kind of supports are not there. The transition is a nightmare for parents. There is a protocol that's supposed to be followed, but in reality many people in the school system are completely unaware it exists. Even when the child care centre is close by, there is very little connection and communication with the school. The child care centre knows a lot about the child, but the school does not value that knowledge. There have been cases where parents

> *have held back children in child care because they know they won't get the same kind of support in school. There's not the openness in the school system—it's such a shock to parents. [The association] is currently working with the [provincial school trustee association] to try to build better bridges between the two systems, in a project sponsored by government, to try to help with the connection between the two systems.*
>
> *For example, one child with autism, had a gifted worker at his child care centre who the parents wanted to continue with him in the education system as he moved into kindergarten. The school board refused because of union issues. They were going to assign someone who had never worked with a child with autism before. Shouldn't we be able to address this from the point of view of what's best for the child? Here's an area where child care has tried but has not been able to impact on policy in this area.*

Environmental Accommodations

How has legislation/policy affected practice?

> *Many child care centres are located in places never intended for child care, for example in church basements, community centres, etc. Capital funding for child care centres has been missing in [the province] in the last few years. So centres usually look for space in existing facilities and typically these spaces are not accessible. New schools as they are built are now required to build a child care centre, but there are not many new schools being built. But there are still so many centres located in make-do spaces. For example, a child with partial paralysis is carried for fire drills, etc. Most playgrounds are not accessible. A lot of child care programs don't have their own playgrounds and have to use those at local schools or parks.*

Is the policy adequate in your opinion?

> *No.*

What could be done to improve physical and program accommodations?

> *In theory, the [child care funding program for children with disabilities] was originally designed to purchase adaptive equipment (e.g. puzzles with big knobs), or to make adaptations to physical space, but today it is primarily used for staffing. If something needs to be replaced (e.g. industrial dishwashers — required by Public Health, a new roof) the centre has to scramble to find the money to pay for it — there are no funds for this. There is no money for renovations through the government. We have a couple of private foundations, or service organizations that are supportive, but it's a lot of work to make these applications. A director may not make a ramp a priority for a funding proposal, because of other demands.*

Are the resources adequate, in your opinion, to facilitate the accommodation of children with disabilities?

> *No.*

Is the monitoring adequate?

> *It doesn't sound like anyone from the government or city is checking out the child care centres. Monitoring overall of accessibility in the province is not that great.*
>
> *A lot of the centres are using ECERS-R that addresses physical accessibility, but this is not tied to licensing. It doesn't seem to be a high priority.*

Parent/Family Participation

How does policy in this area affect practice?

> *In practice, every child receiving a [funding grant] has to have an [individualized service plan]. There is a piece of legislation that addresses it specifically, which requires the participation of parents. I think they are quite sensitive to booking team meetings at times that parents can attend.*
>
> *I was curious to know, "How do we know that the children in child care centres are benefiting? How do we measure that?" There isn't any kind of real tracking. The reason for not tracking progress on the [service plan] goals, I was told, is that it would not be a fair assessment because there are other variables out of the centre's control, for example participation of the parents. But I still think we should do some kind of assessment.*
>
> *Most centres do have boards of directors — it plays out differently in different centres, depending on the kinds of skills that parents bring in. There are class differences — do they have the skills to be able to manage the centre? If parents of children are already stretched and very busy, how likely is it that parents with children with special needs are going to have the time and energy to be involved? What happens to their voices? There has been a lot of talk about governance in [the province], but I ask, are we setting up parents for failure? It's critical that parents have a role to play, but we put a lot of demands on parents, that they may or may not have the skills or knowledge to meet.*

What could be done to improve policy in this area?

> *We need to do more serious work on the best possible model. We are very committed to the model of not-for-profit centres, and I don't think we should move away from that. One thing the [child care association] is working on is establishing a province-wide salary scale, so that boards would not be making those kinds of decisions. We have to find a balance between what parents can contribute in terms of skills, advocacy, philosophy, setting goals, etc., and not putting unrealistic demands on them as volunteers. When things fall apart, it takes an enormous effort on the part of volunteers to get things back on track.*

Program Accommodations

How does policy affect practice in this area?

> *There isn't a policy that defines what inclusion should look like, so there is great variation among centres. There is a need for a huge amount of education in the field, so that children are engaged in the full range of activities in the centre. I don't think that child care has been effective in explaining what inclusion is. There is a role for community agencies and the [child care association], to push. [Post-secondary institutions in the province] offer higher-level specialty programs in inclusion, but it is mostly untrained people who are getting hired as special needs workers. Special needs workers are paid less than the regular child care workers.*

Are the program accommodations sufficient?

> *No. I think there are particular centres that are excelling, that are good role models, but sadly other centres don't know about them. I wish there was a way for other centres to be able to observe them.*
>
> *There's a problem when a centre gains a reputation for doing well with children, or with a particular disability — they attract attention and professionals over-refer children with special needs. First thing you know, it's not inclusion anymore. This is holding us back. There needs to be a way of getting this information to other centres.*

Are the monitoring mechanisms sufficient?

> *I think they are pretty good. We have a system here where the licensing consultants are all people with solid ECE backgrounds. They see themselves as having the mandate to bring in resources and work proactively. What happens however, is that they have large case loads and end up spending most of their time with centres that are struggling and not with the centres that are okay, but could still benefit from having a higher standard and an enriched program. You have to look at what's really happening with the child with special needs — what kind of monitoring is there to ensure the program is effective for him/her?*

In what way have child care centres affected policy in this area?

> *Where you see particular centres that are really doing inclusion — staff may move from centre to centre and take their knowledge with them and influence the new centre. The question becomes how can you maintain momentum, if there is no receptivity from the director? The field tends to rely on [the provincial child care association] to advocate for these kinds of issues. They always have at least three to five workshops on inclusion at the yearly conference. This past fall, the [provincial Association for Community Living] held a two-day conference for parents of children with special needs, child care centre staff and child development counsellors. It was very empowering. As staff learn about the parents' point of view, hopefully they can work for change too.*

Staffing

How does policy affect practice in this area?

> *When extra supports are needed for a child, most of the time, centres hire someone untrained, just "a set of hands". The person is attached to the individual child, and if the child leaves, the centre loses the staff position. That contributes to the retention/recruitment problem. Why would anyone with training want that position when there is no security, and the pay is less than a regular child care worker?*

Are centres generally happy with the policy in this area?

> *No, there are tons of discontent out there. From the field level, there is an assumption that the only way they will take children with special needs is with additional staff. [The provincial child care association] has real concerns regarding who is working with their children. Particularly where there are six to seven children with special needs at one centre, the child development counsellor doesn't have time to model interactions, or have hands-on involvement, because of the workload level. In a smaller centre, the counsellor will go into a centre and model on the floor. Some parents are unhappy because they are not able to access a spot.*

What would you do to improve what is happening in this area?

> *Our whole system is based on the premise that a 1-8 ratio works for children in child care. While this is very doable for an optimum group of typically developing children, in situations where children have behaviour issues, special needs or even separation anxiety, this ratio is inadequate. If they took the [funding] and spread it out across the centres that are working well with children with special needs and moved to block funding where you could reduce the ratio to 1-5, you could still provide one-on-one for the child that truly needs it. But I think we are undermining our goals by doing it in the way we are doing it now. If you had a centre where the salaries were good, the staff trained and the working conditions good, people would stay. And there would be a higher level of care for all children, including children with special needs, and I would like to think we would be closer to how we imagine inclusion to be.*

How have centres affected practice in this area?

There's a lot of work being done in this area, led by the [provincial child care association]. They've developed a model of progressive role qualifications. They've asked the question, "What is the message when we have the least qualified person working with the child with the highest needs?" They are looking at how we use people in centres. People with training should be rewarded with higher pay and responsibility. One of the things we have been looking at is having a permanent inclusion specialist — someone who would be paid more and have a higher level of responsibility. His or her role would be to support all staff in the inclusion of a child with special needs. That person might arrange for additional workshops, and ensure that staff members understand all [service plans]. [The child care association] has taken a strong role in promoting the concept.

Services

How does policy affect practice in this area?

One of the issues is that there is a differential in access depending on where you live. Seventy percent of [the population resides in the main urban area in the province]. But if you are living in a remote area, your ability to access speech service is more problematic. In the north, there are fewer specialists in the ECE area; they are more generalists, e.g. work with all ages. As a result, they may make recommendations that are inappropriate for the age of the child. The whole [program of funded services] is not available to children in non-licensed care, including [early childhood programs and First Nations child care]. It means that if the family has to move to access services, it puts a whole other layer of stress on families. Some of this is the result of jurisdictional struggles between the federal government and provincial government. Native people, in particular, have difficulty accessing services in their own communities. First of all, children may not be diagnosed, because of lack of access to the child development team. People in [early childhood] programs may not have training or expertise in special needs.

Is the provision of services adequate?

It's inadequate in rural areas and the north.

How have centres affected policy in this area?

I don't think they have.

[The child care association] certainly is cognizant of the inequities. They make subsidies for their conferences available to people from the north. It's not the same as having resources close by. The [urban autism initiative] is an excellent program. Workers can take training through it. But this kind of thing is not available outside of [the provincial capital].

How does the monitoring process work?

The transitional planning doesn't work as well as it should, largely due to the resistance of the school system. Yes, kids are placed in the centre. Yes, there is a [service plan] that is reviewed. But they could be doing more to review things on an ongoing basis. The consultation, problem-solving — that's where they need to do more.

Interview with Non-governmental Expert, Province 3

Participation of Children with Disabilities in Child Care Programs

How has legislation/policy (or its absence) requiring the inclusion of children with disabilities affected practice?

The lack of legislation hinders the evolution of inclusive child care. There are still segregated programs in [the province, and the provincial child care legislation] supports this as offering parents choice. I am curious about the allocation of dollars for the [autism treatment initiative] that seems to be supporting specialized intervention. The message seems to be that your child needs to learn certain skills before they can be integrated. It sends a double message to parents where parents are being told, in effect, that inclusion is a lesser option, and that their child can only be properly supported through intensive one-on-one support with a strong behavioural component. We don't agree with this message. An issue for working parents is that parents are expected to attend all the sessions and they're supposed to learn how to do the intervention. This makes it very difficult for families to juggle everything and not feel guilty at a time when all young families in today's society are time poor. Families need support to access quality child care options that provide the necessary supports for their children. Some families have withdrawn their child from child care to participate in the intensive program. The money is coming from [the ministry responsible for social services] and most of the money is going to serve a specific population. As it is a research project, it doesn't serve all children with autism—it's age limited and the child has to fit certain criteria to be accepted into the program. Parents go through more stress if their child is not accepted. This highlights that it is still a very segregated or exclusionary model. For every child that is served, it costs between $40,000 and $50,000 a year and for other children with special needs that are supported in child care, under the inclusion model, the average cost is $4,430 for support. Some kids require more, for example, those who may require full-time program assistant support. On average, supports for inclusive child care costs much less per child. The ideal for the child and family would be to access intensive intervention as well as supported inclusion to support the generalization and consolidation of skills. Through all of the various provincial government initiatives at roundtable discussions, the need to eliminate silos has continually been highlighted. Rather than supporting one door for parents to be able to access information, resources and support, we now have more doors or silos in our community. The work is left with the various agencies to meet, develop protocols and work to ensure there is not duplication of services. Agencies are also resource and time poor. We all do more with less.

The [provincial child care legislation] is so outdated, that it is not supporting the direction the ministry is encouraging centres to go in. A revised [child care Act] that would identify guidelines and set standards, would provide better checks and balances as far as quality of care goes.

We are seeing that some parents opt to keep children in child care until age 6 (and sometimes beyond age 6) because of the lack of support in schools. They think their child is better off staying in child care rather than going to kindergarten without appropriate support. They do not want a segregated model of education for their child. Now they are asking for home-schooling, and want continued child care support even though obviously one person is at home providing home-schooling. Child care is accessed to provide socialization opportunities in an inclusive setting. The lack of support in education is putting more pressure on child care and resource teacher programs that provide the necessary support.

The [provincial legislation dealing with school safety] has led to young children being put out of school, and they end up back in child care. This also creates more pressure on the system. If a child with a disability has a behaviour problem (e.g. biting) it's likely to be dealt with more severely than with a child without disabilities. Developmentally, a child might be doing something that is age and stage appropriate, however due to the child's special needs, the withdrawal of that child might be seen as the necessary response. Services for children who have high behavioural needs have had a limited ability to provide the necessary outreach to support the children in the regular school system, and so breakdowns occur and the child goes back to child care.

At the outset, people at the grassroots level implemented inclusion. Historically, training programs for staff working with children were divided between those who would work with children with special needs, and those who would work with typical children. Over the last 12 years, the community colleges have identified the need to change the content of the Early Childhood Education program to better reflect the requirements for early childhood educators in today's child care programs. Colleges have partnered with child care inclusion experts in the field to provide input into the training programs, act as guest speakers, and teach specific courses regarding disability-specific information and inclusion practices. This means that the teachers of tomorrow will have a better foundation and understanding regarding their role in supporting all children in an inclusive way. Similarly, work has been done through the continuing education department at the college level to develop an advanced studies course that also covers similar disability-specific information to better support people who have been in the field and not had exposure to this type of information. This type of approach places the interest and responsibility on the individual to support him/herself in the role of supervisor and manager. Without a revised [child care Act], there is no way of ensuring a certain level of quality.

Program Requirements

There is an interesting model in [a mid-sized city], where early childhood inclusion experts had a longstanding positive relationship with people in municipal government, who saw child care not only as a positive support for work, but also a support for positive child development. The city funds only 20 percent of the child care budget, the rest comes from the province. The city had to develop a child care plan for the province—they worked hard to consult child care centres, families, etc. Through this process, a community agency was able to get one-time funding to augment the base budget as the child care community flagged their need for more support, which meant more dollars for the program delivery during this process. Needs were addressed, and with ongoing communication and highlighting that more children were being identified and required more support, the need for sustainable funding was identified. In 2002, the [city] and the province agreed to increase the base budget... with ongoing funding. This, I see as a significant commitment.

As there has not been any new money directed toward child care from the provincial government, the funding was redirected dollars from the child care subsidy system. There has been an underutilization of the subsidies due to the changes in financial eligibility. The issue is what will happen over time to the subsidy system if money is slowly being directed to meet other needs? Subsidy requires that the family have less than [a given amount] in liquid assets including RRSPs—this requires families who are at the edge to liquidate their resources to pay for care. This puts parents with children with special needs who are trying to save for their future and their child's future and long-term care at additional risk. The government is not seeing the value of child care for all children. Those children who have had the benefit of inclusive child care are going to be much wiser and more comfortable with diversity in the general population. It is an investment for the future that will be good for everyone.

Are the supports for children with special needs adequate in your opinion?

No. There is not an agreed upon approach to providing support for all children. Funding has been targeted at different times based on advocacy for specific needs or disabilities. Communities have developed their own model to support inclusion and there are various models operating throughout the province. One of the issues is that in most of the province, support for children with special needs in child care is not extended beyond the preschool age range. Some models support children in child care up to age 10-12. During the regular school year, children do okay and usually do not require enriched support. However, on school holidays and Professional Development days the child care programs may need an increased level of support due to the child's and the program's needs. Supports should be where the child is and the child should be where the parent wants them to be, not on the other side of town. That is one of our core beliefs. Models vary across the province depending on the local needs. But there are still pervasive gaps. For example, children with medical needs are not able to get health dollars to support

> *their inclusion in child care. The same child with a medical need could access support in their home or in school, but not in child care.*

What could be done to improve access?

> *We need legislation coupled with training, so that people know why we are doing this, and it is demonstrated that it is possible, and the supports are there to make it work, so that children and parents have rights and opportunities. It is the socially responsible thing to do.*
>
> *Centres have asked us whether they could be charged under the Human Rights legislation if they said no to a child attending. We tell them to develop a plan, laying out what the child needs and what their program will need to support the integration process. If the necessary supports cannot be provided, then the need is flagged so that once funding/supports are available down the road, they may be able to include the child.*
>
> *Some parents are also afraid to disclose that their child has special needs lest the centre turn them away. We try to work with parents and the centre to see that supports are there so that the child is not refused. There is, however, a finite amount of funding to support this vision, and so sometimes families and centres need to wait until funding becomes available for a child to start in a program.*
>
> *In one case, a child with disabilities was refused care in an after-school program, because they claimed there wasn't a space. The family took it to the [provincial human rights body] and won. The centre had to demonstrate a change in attitude and approach. In another case, parents of francophone children with autism launched a challenge because there was a specialized nursery school that was offered in English only. This challenge is still ongoing.*

Do you feel that child care centres have had an effect on policy in this area?

> *No.*

Environmental Accommodations

How has legislation/policy affected practice?

> *I don't think it has. There was a time under [a former Government] where they required new schools to have a child care centre attached to it and it had to be accessible. This was a wonderful window of opportunity. But the next government did not continue with this directive.*

Is the policy adequate in your opinion?

> *No.*

What could be done to improve physical and program accommodations?

> *On the one hand, money and capital investments are needed to support centres in changing their physical environments to make them more accessible. On the other hand, just because a child has special needs, it doesn't necessarily mean that physical accommodations are necessary.*

Are the resources adequate, in your opinion, to facilitate the accommodation of children with disabilities?

> *No. There aren't enough licensed child care centres. So what's happening is that the child care centres that are licensed are being overloaded with children with special needs, and they are becoming specialized centres regarding certain disabilities as through word of mouth parents share their successes with other*

> *families (i.e. nursery school that several children with autism attend). We are beginning to have waiting lists for our supports. The provincial government is encouraging early identification and intervention and hopes that in doing so children will be ready for school entry. Some of the children will never be "ready for school entry" in the traditional sense; however, all children have a right to an education that supports them reaching their own unique potential. There have not been enough ongoing resource dollars provided to existing programs to pick up and support the new children that are now being identified at an earlier age and who will continue to need ongoing support.*

Is the monitoring adequate?

> *I don't think so because they only do it at licensing time, and something could come up in the meantime. There should be more spot checks and follow-ups, to make sure that minimum standards are being maintained (e.g. are toys being replaced as necessary?). Early childhood educators feel that it would be beneficial to have set standards and guidelines that speak to quality indicators, not just minimum standards. They would like to be acknowledged for and supported in the work that they do.*

Parent/Family Participation

How does policy in this area affect practice?

> *Under the [provincial early childhood development program], they are talking about the need for parental participation, but it hasn't really affected our parents, because it was already happening—it's part of our core beliefs. As the [program] rolls out, it could affect participation, if it establishes a requirement from all services that parents be involved. My answer might be different a year from now. Other programs that support families who have children with special needs, also believe in family-centred approaches. It is nice to see more of a community approach in supporting families.*

What could be done to improve policy in this area?

> *Listening to parents. Stop funding in silos. Start funding a seamless, more cohesive system, and support it with legislation. For example, under the [Government policy in place at the time], child care has been left out. We have to wait to be invited to the table. Some families are over-resourced, and other families who don't have the stamina, resources, articulation, are marginalized, and stand in cue and wait for services as they come. In a lot of provincial documents, child care is barely mentioned, and special needs support not at all, so it could easily be wiped out. And then where does inclusion go from there? Parents know what they need and what their child needs.*

Program Accommodations

How does policy affect practice in this area?

> *The [provincial child care legislation] talks for all children, but not specifically. The government needs to talk with people before making changes. For example, the [document released by the minister responsible for social services] advocated for increased ratios for after-school care. That would have had a devastating impact on our capacity to serve children with special needs in our school-age programs. Fortunately, it was never acted upon.*
>
> *There's no accreditation system. Having one would be a way of assuring quality programs.*

Are the program accommodations sufficient?

> *I agree with the government benchmark survey summary.*

Are the monitoring mechanisms sufficient?

> *I don't think so. There isn't a provincial expectation. As part of our child care legal agreement we conduct an evaluation, and we share this with the province, but I don't know if all programs do this. We use it to identify what is working and what is not. Through discussions, the model that has evolved has been in response to the changing and identified needs for children, families and child care programs.*

In what way have child care centres affected policy in this area?

> *Politicians are more informed at the municipal level than they were in the past. They've had to become informed and the child care community created information kits that highlighted the issues present within the child care sector.*

Staffing

How does policy affect practice in this area?

> *Building on the regular staff ratios, we are able to provide an extra pair of hands that is not a shadow, but an assistant to the program. This approach is our own policy; it is not part of legislation.*

Are centres generally happy with the policy in this area?

> *I think so. However they could always use an extra pair of hands, as the needs of children have become more complex.*

What would you do to improve what is happening in this area?

> *I would like to have more flexibility in child-staff ratios, where they can reduce the number of children based on the needs at any time and not risk their funding. Of course, this might create other problems such as increased space shortages. Due to budget cuts, many child care programs had to cut out any professional development funding they had in order to maintain the program. This was a short-term solution that has created a long-term problem as staff are not able to access necessary training or be freed up to attend training due to the lack of ability to find and fund supply teachers.*

How have centres affected practice in this area?

> *Child care programs were quite vocal, advocating what their needs were regarding the inclusion of children with special needs. They feel that they can be inclusive provided they are able to access support and the required resources.*

Services

How does policy affect practice in this area?

> *There's no policy directive in this area. Early childhood educators are thinking about defining better what they do. There is a perception that child care is just that, child care, and people do not thoroughly understand the benefits for all children in supporting positive outcomes in child development for all children. This reality is the ultimate community support to parents and recognizes the ongoing and necessary partnership that is created with families. It's covered under [Government policy], but as I said earlier, child care was not part of this — we had to be invited to the table and when we were in discussions, we kept having to ask where is child care/special needs resourcing as part of the support continuum? There is a reference to a small "c" in child care with no specific definition or description of*

> *services that are provided. None of the [Early Childhood Development Initiative (ECDI)] money was put into child care. They put money into increasing mandate for [ECDI] but they could have put the money into licensed child care where children with special needs could have been included and supported.*

Is the provision of services adequate?

> *We certainly have speech therapists. The speech and language preschool program has truly made a difference to many children and families. It was also one of the first examples where a system of service was put on the table and the community partners could collectively identify gaps, issues and successes. One area that is still an issue in our area is supporting children with a speech need and possibly a cognitive delay. These children are referred to a multidisciplinary team for further assessment and they have a significant waiting list that could be up to a year. While waiting for assessment, some of these parents lose their spaces in child care because they can't get the supports. Services can only begin once a formal diagnosis has been given. There is a two-tiered system where parents who have health/private insurance have quicker access to services as they can purchase services in the private sector. One of the things I would like to see is for the government to track who is getting services. Then we could move away from some families being over-resourced and other families getting nothing.*

How have centres affected policy in this area?

> *Not necessarily, because they have accepted the supports they have been given. The child care community really hasn't had a voice. We keep advocating for speech therapists to go out to identified kids in day care, where they could work directly to support the early childhood educators in working with the child. This happens in exceptional circumstances at this time. For example, if a preschool child has a developmental delay and is attending licensed child care, then there is a team of therapists that can consult with the child care programs. But, just a straight speech delay will not get that service in a community child care program. Parents may not be able to afford to take the day off to attend appointments. Not all employers have family supportive policies.*

How does the monitoring process work?

> *It is my understanding that some specialized services are in the process of moving away from silo programming and they are planning significant changes. Two ministries are saying that we have to change the way we are doing things and use our resources differently. The vision is that children and families will be supported based on need rather than specific diagnosis or labels.*

Interview with Non-governmental Expert, Province 5

Participation of Children with Disabilities in Child Care Programs

How has legislation/policy (or its absence) requiring the inclusion of children with disabilities affected practice?

> *I'm surprised at the report statement that there is no legislation. I thought [the provincial child care legislation] had a paragraph prohibiting discrimination. Certainly the old Act did. I would be very surprised if it was taken out of the new Act.*
>
> *Practice-wise, I've seen a greater and greater attempt by centres to include children with special needs. There's been a definite increase over the last ten years in the number of children being integrated into child care programs. Ten years ago, I saw one or two children out of 25 to 30 centres. Now I see children requiring special support and/or programming in most centres.*

Are the supports for children with disabilities adequate in your opinion?

> *I know that parents have really had to struggle to get funding to pay for these extra supports. It used to be that government would pay for one-on-one support. It has become difficult for parents to access these funds. Many parents are trying to pay for the regular fee in addition to a one-on-one, resulting in many being able to afford only part-time child care. There has been an increase in training funds, particularly with children with autism. It has not been widespread for all children with disabilities. There are so many children with a range of disabilities (e.g. global delay) where the children are not getting the supports they need. It's not that children with autism don't need the support, it's that the other children need it as well. ABA (Applied Behaviour Analysis) is highly popular in [the province]—just heard that every worker working with an autistic child will get ABA training. Many people in ECE are not in favour of behaviour modification methods and personally I would like to have seen more progressive methods. There has been some discussion that this method is also beneficial for any child with challenging behaviour and I am quite concerned about that. All the information/research we have on cognitive development and personality development takes us to a humanistic approach. We have the research to show what is necessary. It really concerns me that we are moving away from that.*

What could be done to improve access?

> *One of the problems we've had here is that people with no training at all, are the people who have been hired as one-on-one supports. If they could be trained in ECE, or at least in how to adapt programming, improve participation, so that these children can participate to the fullest, that would help. I think that access to funding for support needs to increase. Even if parents do access funding, there never seems to be enough funds to facilitate full participation for parents who are working. So, parents are stuck with a patchwork approach to child care—part-time child care, and then they have to hire someone different for the rest of the day resulting in inconsistency. We should be striving for enough supports so that children can participate full-time. My understanding is that children who are already supported by a subsidy, can access additional supports, but it used to be that they could access full-time child care, and now it's only half days. There should be full-time care for children. We're talking about children who need more, and now they're getting less.*
>
> *One thing that has happened here is the use of [service coordination policy], which ensures a collaborative approach.*
>
> *[One child care centre in the province] has been fully funded for children at risk or children with developmental disabilities. For some children, it has been a godsend, but the children don't have exposure to other children that would fall within the realm of typical development. So, there's not the role modelling or other benefits of integration. It's a segregated program. So, what's happened is that in cases where the parents have lost their child care funding, they put the child on a wait-list for [the centre]. But even then, I know of a case where a family could only get halftime at [the centre]. Both parents are students attending school full-time and they have been forced to keep the child in regular child care without supports.*

Do you feel that child care centres have had an effect on policy in this area?

> *I think the government does support integration, and I think the fact that child care centres have opened their doors to these children, and done a really good job with a variety of disabilities, has influenced the government. I think of one situation with a child with spina bifida, where they developed among the other children a real sense of empathy and caring towards each other.*

Environmental Accommodations

How has legislation/policy affected practice?

> *The legislation has resulted in an increase in the number of child care centres that are accessible. The traffic patterns are changed so that children have lots of room to move. There have been a number of places that have made accommodations such as lowered handles, modified equipment, instructional materials, etc. I'm not seeing physical barriers in the child care centres that prevent children from participating. I've seen real innovations in facilitating participation. I haven't seen as much change in the accessibility of playgrounds. Some have had partial modifications. Most child care centres have had fewer outdoor accommodations, than indoor. I think we have a lot of work to do with playgrounds in general. We need to improve safety, etc.*
>
> [According to another child care expert, few child care centres in the province are fully accessible, in that many centres are located in house basements or on the second floor of buildings without wheelchair access.]

Is the policy adequate in your opinion?

> *I think any regulations governing outside play space need to be improved because there are no regulations except concerning the size of the space. Regulations governing indoor space are quite good.*

What could be done to improve physical and program accommodations?

> *Outdoors, we need to improve the ability of the child with special needs to enjoy the outdoors as well as any other child. So, they need to look at the accessibility of outdoor space. Some have stairs that should be changed. There needs to be more flat space for children with walkers or in wheelchairs. There's a greater need to have extra staff outdoors to help children participate. Outdoor equipment could be modified.*

Are the resources adequate, in your opinion, to facilitate the accommodation of children with disabilities?

> *The resources are inadequate—the funds given to child care centres are limited, but even if a small portion were directed towards physical accommodations, it would help as well. So much of the accommodation is up to the individual staff, rather than resources. Wooden knob puzzles for example, are expensive and hard to get here. I encourage staff to be creative in finding ways to accommodate children with special needs.*

Parent/Family Participation

How does policy in this area affect practice?

> *Formerly, there wasn't really a board; there was an admission committee. It was thought that this would prevent discrimination, but I don't think it was ever put in place. The odd centre did, but it wasn't used appropriately.*
>
> *Parents have had the opportunity to be involved with policies of centres because there is a belief that parents need to be involved in their child's care. It certainly plays out in the smaller centres. I'm not so sure about the larger centres. The parents are really the advocates on behalf of their children and come to the centre with knowledge that the centre needs to address the child's needs.*
>
> *The [service coordination policy] helps to facilitate parental involvement. The parent is often the one that leads the team meetings. So, we're seeing that a parent-centred approach is working well and I think that the parents' opinions are highly valued. This is a big change from years ago when parents were largely excluded from the process. I do see a big effort and a real acceptance in this area.*

What could be done to improve policy in this area?

> *I think that government could take the lead in making this part of the legislation.*

Program Accommodations

How does policy affect practice in this area?

> *The regulations do not indicate any difference with reference to ratios of children with disabilities. There are simply the regular ratios, and then if it's possible to get extra one-on-one support.*
>
> *The policies/practices of centres as opposed to the government's and their commitment have made a difference, but government policy is lacking in this area. Centres don't have extra funds to change the program—it's staff who are doing this.*

Are the program accommodations sufficient?

> *I can't say they're sufficient, because I don't think there's enough support for all children. I think there are lots of children who need additional support that they are not receiving. If there were better supports (funding for staff, equipment and materials) there would be a greater capacity to meet the needs of children who need additional support.*

Are the monitoring mechanisms sufficient?

> *The government has now hired social workers and child care service consultants who are trained in ECE, who work with the social worker to monitor programming. It's probably not adequate, but these are new positions, so it's a lot better than before when we had nothing. We have two in [the provincial capital] for 85 centres. I don't know to what extent they are monitoring children with special needs, but this is their responsibility.*

In what ways have child care centres affected policy in this area?

> *I think they've been leading the way. It's the centres that are showing the government how to do it.*

Staffing

How does policy affect practice in this area?

> *There's a little bit of a gap there. Policy has been improved considerably in terms of qualification requirements. Everyone must have some level of training. Even the volunteers who are part of the ratio have to have the orientation course. [However] there's nothing about special needs support workers requiring training. It's missing throughout the regulations. In addition to the assistant, the lead child care workers have to have at least one year, and supervisors/directors would have to have a two-year diploma.*

Are centres generally happy with the policy in this area?

> *I think that they are happy with going in the direction of required training. Of course, there are always a few that resist the changes—"I've raised my own children, I've worked for ten years, etc.—I don't need the training."*

What would you do to improve what is happening in this area?

> *We've been pressured to have a course on children with special needs, but we've resisted that in favour of integrating knowledge about children with special needs into all the courses. For example, we talk about program accommodations of different disabilities in the regular course. There's a real concentration on parent involvement in all the courses. I think the staff learns from our program about how to engage the children in an integrated way, without having to think about it. It's expected that all children will participate. I've seen some of our students deal so well with children with special needs, so sensitively.*

How have centres affected practice in this area?

> *Centres are developing their own policies and leading the way. I can think of three centres, for example, that have expressed their desire to improve their policies.*

Services

How does policy affect practice in this area?

> *There are a greater number of speech pathologists; occupational therapists are also coming to the centres, probably generated by the [service coordination] process. This is not covered under the child care regulation.*

Is the provision of services adequate?

> *I don't think it's ever adequate. There are so many children on waiting lists. There are not enough specialists, nor people to connect the child care centre with the transition to school. I don't think enough attention has been given to it to make it adequate.*

How have centres affected policy in this area?

> *Centres are doing this so much on their own. I don't think the policy has changed. I think the centres pushed to have the [service coordination] policy in place, but I don't think there's been enough change in government policy. Parents and child care centres are working together and doing it on their own.*

How does the monitoring process work?

> *I don't know about the monitoring. I know that there's a lead person on each team. I don't think monitoring is the role of any inspector. I don't know whether the consultants monitor services—it would be wonderful if they did, but I think it's largely left up to the team.*

Interview with Non-governmental Expert, Province 6

Participation of Children with Disabilities in Child Care Programs

How has legislation/policy (or its absence) requiring the inclusion of children with disabilities affected practice?

> *It hasn't affected agencies that have always been inclusive. Agencies can access [the ministry responsible for education], which is fairly generous relative to other provinces. Of course it could always be more. But it's enough for what needs to be done. When we're talking about children with special needs, they provide more monies for the key worker [one-on-one assistant] at $14 to 16 per hour, while the rest of staff are getting $11 per hour even though they all have two-year ECE diplomas. This money is available only*

if a child care program has [been approved by the ministry responsible for education] so that automatically eliminates many of the programs in [the provincial capital].

Are the supports for children with special needs adequate in your opinion?

Again, they're pretty generous. [The provincial funding program for children with disabilities] is quite generous. Officials may be quicker to say, "No", now, given the large number of applicants, and then parents have to appeal. When parents do appeal, they usually get the money they requested. There have been huge amounts of money going to programs like autism, so they've become more discriminating on some of the funding. Centres use several of the funding sources, and they are quite generous. Probably the biggest thing is that there are not enough spaces — some programs cap how many children they fund, although the per capita funding remains generous.

What could be done to improve access?

A lot of parents are not aware of where to go and what to do. More public information on inclusive child care would help. Referring agencies/hospitals are not always aware of available child care programs. I do think that there's still a perception among parents that if they have a child with special needs, they have to look after that child themselves, find private care or whatever.

Do you feel that child care centres have had an effect on policy in this area?

To a certain degree. Certainly with some of the better child care centres, government is aware of them in terms of policy.

Environmental Accommodations

How has legislation/policy affected practice?

One centre is in an old red schoolhouse building, so it has no wheelchair access. The centre leases space in the basement. Once or twice staff actually carried children in who were in wheelchairs, which of course is not acceptable. So the centre has been cut out of an area of inclusion that it could have been involved with. I can't say I'm overly familiar with policy in this area.

Is the policy adequate in your opinion?

I'm really not familiar with this. I can say, however, that there are a number of child care programs that are not accessible because of the types of buildings they are in.

What could be done to improve physical and program accommodations?

Centres have had a certain amount of money for modified equipment from agencies in the past. But, needs change. Many children now have language and behaviour challenges rather than physical disabilities.

More buildings should be made accessible because there are lots that are not. There should be more equipment for children who need it and more awareness of the funding sources, both for parents and for participating agencies.

Are the resources adequate, in your opinion, to facilitate the accommodation of children with disabilities?

It's always nice to have more. I can only speak on a limited basis. By and large the resources have been quite generous for large programs. For a smaller program, it may be a different story.

Is the monitoring adequate?

> *I don't think it is. When centres apply for funds, the appropriate authority may come out and they may not. There's lots of paper monitoring, but it could be better in terms of coming out and having a look. [The ministry responsible for education] has given centres a fair amount of money, but in some cases, they have visited only three times in eight years.*

Parent/Family Participation

How does policy in this area affect practice?

> *There is a policy in place that requires a [service plan] and that has to be done in conjunction with the parent. The [service plan] is required to be written along with the parent, and the appropriate consultants, teachers, etc.*

What could be done to improve policy in this area?

> *That's a good question. Some agencies have a very good record in that area. The clientele in one centre are high risk, and they provide a group once a week where they provide supper and child care, so they have a lot of parent involvement. The centre does these things but the province does not mandate them. Some of these things could be mandated so that parents felt that they were more involved in this area, and that they were also being advocates for their children.*

Program Accommodations

How does policy affect practice in this area?

> *[The ministry responsible for education] has very specific guidelines in place for program standards, what they would look for — programming, integration, etc. It doesn't affect practice in some centres because long before they started accessing [the ministry], they were doing those things anyway. Perhaps they are more aware of what they are doing in their classrooms, as a result of the policy.*

Are the program accommodations sufficient?

> *I think so.*

Are the monitoring mechanisms sufficient?

> *Most of the monitoring is done through paperwork. The one exception is [the provincial funding program for children with disabilities], which has more of a hands-on approach. They actually do a home visit and may come in to the program to meet staff, ask for the [service plan], etc.*

In what way have child care centres affected policy in this area?

> *They have brought the government's attention to what needs to be in place for inclusion to happen.*

Staffing

How does policy affect practice in this area?

> *Because there are no guidelines in place, it's up to individual agencies to set personnel policies. Having*

said that, [capital city] centres have set their own standards requiring diplomas. The difficulty is finding qualified people. The pay is so low any college graduate goes elsewhere. If a centre can't find staff with ECE qualifications, they may put one qualified person in a room and surround them with people with some but less formal training, and build a strong team that way. Staff with other qualifications may be hired as well, for example with a Rehabilitation diploma, etc.

What would you do to improve what is happening in this area?

There should be a provincial policy. Unfortunately, this goes hand-in-hand with the government's slow response to what's happening in the child care community in this province. There are a lot of children with special needs in child care centres, but as I mentioned earlier, there is a large salary difference between the one-on-one workers and the regular workers who are working together on the floor. The wage disparity creates hard feelings among staff. [The province] has [a very high rate of staff turnover]. The salaries need to be addressed, and there needs to be more uniform standards across the province with some meat to them.

How have centres affected practice in this area?

The government has just implemented a program. Under this program, an accredited child care centre would receive [a given amount] per month for staff support for every [qualified] staff working in the centre. While the money is supposed to go to individual staff, there is no accountability for child care programs to do so. A centre could use this money to replace money they are already paying in salary, without giving a salary increase to individual staff. This new government program was to be followed by a pre-accreditation process within the subsequent three months, and then the full accreditation process.

Services

How does policy affect practice in this area?

The policy determines the practice. We know what we have to do, so that services are there for those children who meet the criteria.

Is the provision of services adequate?

There's enough money for the service, but some of the difficulty is finding the service, for example, speech-language, occupational therapy, etc. Government provides $65 per hour for speech therapy, while therapists charge $90 per hour in private practice.

How have centres affected policy in this area?

I really haven't been involved in that to any large degree.

How does the monitoring process work?

Again, programs are supposed to have [service plans] and all of the supporting documentation in place. Again, there are not enough programs to serve these children, due to the heavy preponderance of for-profit child care programs versus not-for-profit programs in [the province].

Interview with Non-governmental Experts, Province 8

Interview 1

Participation of Children with Disabilities in Child Care Programs

How has legislation/policy (or its absence) requiring the inclusion of children with disabilities affected practice?

> *I don't think there's legislation that prohibits exclusion of children with special needs. But in reality, the lack of support systems and the limited financial resources we have access to, means that children with disabilities in many instances cannot be incorporated in a program. For example, we don't have the staff ratio to be able to accommodate a child in a wheelchair who may need extra time to meet some of his or her basic needs, so in practice this child is excluded.*

Are the supports for children with special needs adequate in your opinion?

> *No. What the government informant says about what the government is trying to do is true. But if we have a child with high special needs who needs care, we have to look at this particular child's needs and consider if we can help her/him. For example, one centre had a child with cerebral palsy in a wheelchair who eventually was too big and heavy for one staff to lift. In the end, staff were forced unwillingly to ask the parent to find another setting for the child. The child was eventually accommodated in a special preschool program and later admitted to school, but summers remained a problem. During the summer the child returned to the child care centre part-time. One of the things that was upsetting for staff was to see that the child needed special attention as her concentration needed reinforcement and often they were busy and could not provide it. The child ended up being ignored a bit at times, and this is something that should never happen. Having a child with a disability leads to a conflict between wanting to give the child what he/she needs, and providing programming for the other children. You need adequate resources to balance both needs.*

What could be done to improve access?

> *Support for inclusive child care. We need more funding so that child care centres can deal with special needs. Every child has a right to be in a setting with his or her peers.*

Do you feel that child care centres have had an effect on policy in this area?

> *I think that child care centres are affecting the government and, in general, more support is coming, but it is not enough. There are regulations concerning how many children with special needs can be in a centre, but that's about it. We are very much in development in this area.*
>
> *The government does not provide for a range of models in urban and rural areas. We are dealing with a human deficit; children are left with needs unattended. This is a result of governments unable or unwilling to provide the supports to deal with children with extreme needs in regular child care settings. Some centres always have had children with special needs. Some have had several children in wheelchairs, but there comes a point when if it affects the programming the centres can't accept more children. It often happens that some children with special needs end up with other problems — i.e. emotional and behavioural, due to the stress the families are under — so, their needs are quite complex.*
>
> *The reality is that if a centre is going to have six children in wheelchairs needing care, the director has to consider whether the grants will cover the cost of providing extra staffing to accommodate these children. Grants depend on availability of funds and centres have to wait for the outcome of the application, a process that is extremely bureaucratic and takes time. In the meantime centres have accepted the child and have to wait to see if money is available. If a centre has a high needs child, and it does not get the appropriate supports, the whole program can be adversely affected. The whole process needs to be streamlined so that children get what they need, when they need it.*

Environmental Accommodations

How has legislation/policy affected practice?

> *Some centres are new so they are built to be wheelchair accessible. Many child care centres are in old buildings — churches, etc. that are not adequate. A whole generation of children has grown up in inadequate facilities and you wonder if we aren't now well into the second generation of children who are in inadequate buildings. Centres meet regulations by a shoestring and do the best they can. Renovations are expensive; staff can't do what they would like to improve the building.*

Is the policy adequate in your opinion?

> *It's coming. Is beginning to change, but you need the funding to back it up. Right now the funding is inadequate.*

What could be done to improve physical and program accommodations?

> *There must be rigorous standards like the ones schools have. They don't put schools in basements. Schools don't have a playground where the children have to walk down the street to access it. They should not allow child care centres to open until they reach higher standards — not when the only playground is a strip of land between parking lots or adjacent to busy main traffic arteries.*

Are the resources adequate, in your opinion, to facilitate the accommodation of children with disabilities?

> *No. They are very limited. There is a pilot project that is totally inclusive, and the government is working to develop it more fully. The government is encouraging centres to become inclusive and they are setting up pilot projects. We are applying to be one of them. Every centre should be inclusive.*

Is the monitoring adequate?

> *Yes. They are working very hard on getting buildings up to standard, and they no longer license centres that are not adequate.*

Parent/Family Participation

How does policy in this area affect practice?

> *The government is moving towards parental participation and they are involving families more and more, particularly with younger children. Involvement depends to some degree on the families — some are strong advocates for their children, while others are intimidated if they need to meet with referring professionals and others shy away from the whole process. But there is some support in place for the parents.*

What could be done to improve policy in this area?

> *The government is good at sending out pamphlets. There has to be a change in mindset in general towards accepting children with special needs. People have to think and practice inclusion, but we are not there yet. It is a process that is happening very slowly. The public, policy makers, parents, staff, have to be educated as to the importance of child care for all children and its benefits for society. When children with special needs are excluded from child care, they are suffering discrimination. It is also indirect discrimination against women, as usually mothers are the primary caregivers and cannot go to work. It is discrimination against families who need to find the best care for their child. Poorer countries than Canada can provide affordable child care. Why can't they do it here? It's not just the money. It's a matter of priorities. The decision-makers just don't understand the importance of child care.*

Program Accommodations

How does policy affect practice in this area?

> *The government will specify best practices, they encourage centers to do what is needed, but if centres don't have the resources, then they cannot successfully do it. Unless they are doing something totally illegal, they are not going to be closed down. For example, if centres don't have enough space for storing an adequate number of building blocks for several children to play creatively it is not great, but all they can do is modify the program the best they can to provide quality and variety. But centres are limited by the space in which they are functioning and which, by the way, has been licensed by the government to operate.*

Are the program accommodations sufficient?

> *I don't think so. There are children who need to be in child care who aren't. In some instances children who are in child care don't have their needs met for lack of resources. There are children who fall through the cracks because of lack of awareness. For example, if the parents of a speech-delayed child don't realize or accept that he or she is behind, they will not look for professional help. Also child care is expensive and cost is a deterrent if parents cannot afford it. In many centres, the subsidy covers less than half of the total fee.*

Are the monitoring mechanisms sufficient?

> *The structure is there but the government itself does not have the resources to monitor effectively.*

In what way have child care centres affected policy in this area?

> *There is a vocal group in the province and they make their needs known clearly. Many child care centers are aiming at meeting the needs of all children. I think the government has listened to some child care centres. Advocacy efforts have had some influence and there have been some changes in government policy. Within the government child care branch there are individuals who are trying to implement changes, but the government is very slow to move.*

Staffing

How does policy affect practice in this area?

> *In one centre, for example, there is a special needs coordinator whose salary is paid by the individual grants received for each enrolled child who has been identified as requiring extra help. If one or several of the children leave, the position is in jeopardy. The special needs program is provided on a very unstable basis. The centre went down from eight children to four, and the remaining children barely covered the coordinator's salary; the possibility of reducing the hours of work is always there. The coordinator has a Master's in Psychology, so we are not talking about someone who is unqualified.*
>
> *Government has created wage enhancement grants to improve wages for child care workers, but special needs workers are dependent on the grants attached to each special needs child, and this creates uncertainty and retention problems.*

Are centres generally happy with the policy in this area?

> *Not really. Wages are not attractive. The government is now requiring a minimum of ECE 1 – 3 core classes of the certificate, which is minimal training. All the staff in some centres have more than the required education. Special needs training is part of the regular course in year 2 if students take the*

diploma, but many only take the certificate and that's all the training they get in the area of special needs. There are no regulations covering qualifications for workers hired as special needs supports. It is difficult to require specific qualifications if salaries are not adequate.

What would you do to improve what is happening in this area?

Awareness, acceptance, and part of the process of awareness is having children with special needs enrolled in centres so other children become more accepting.

Staff need training and opportunities to go to workshops, and to develop an understanding of inclusion and the needs of children. Staff must have an understanding of developmental milestones, more so when working with special needs children. If the child care sector were to become competitive as employers, and child care was seen as a rewarding career, then maybe the sector could attract the people it needs and ensure that they have training that is adequate. The way it works out now, child care workers go to college, and emerge without an understanding of what children with special needs really need. Part of the problem is that child care attracts the wrong people to the field — many students go into it because they like children and they think it's easy to work with them. Some are young and inexperienced and need more maturity to deal with the demands of the job. We need to change the educational standards, the salaries and the status of child care workers so people attracted are suitable and they remain in the field—I think it has to do with the role of women and the way women and children are viewed by society as a whole. Women end up discriminated against if they cannot afford child care for their children; they cannot advance if they cannot find good jobs for lack of adequate child care. The child care force is made up largely of women who work hard for low wages, many without benefits, pension, etc. To make child care a career of choice, one shouldn't have to commit to poverty. This is another form of discrimination against women in the field.

How have centres affected practice in this area?

We keep losing people who are qualified. I think child care centres have affected policy and they have a role to play. I wish more were done. Once a child care centre photocopied the pay stubs of staff and sent them to politicians. The politicians were shocked at how low the wages were. This is the kind of thing that might bring change, but it's a slow process.

Services

How does policy affect practice in this area?

I acknowledge that there is an action plan for children in place, but it does not address the whole spectrum of early childhood care. We have to look at the whole picture. I know we have to start somewhere but centres have been struggling with lack of resources for a very long time. A new initiative for child care centres is the [funding program to promote accessibility for children with special needs], which allows centres to bring in extra support staff. However, the fund is limited and there is a waiting list. If the funds have been exhausted due to the high demand, you cannot receive extra support for the child. Centres have to decide then if they can accommodate that child without affecting the regular program.

Some centres have access to child and youth consultants who come regularly and also to speech therapists. That's a very positive step. This is a new initiative; I'm not sure if it is policy.

Is the provision of services adequate?

Consultants are very busy — it is not unusual for them to have to cancel appointments because some crisis comes up. It's a good beginning, but the needs are so great that they are swamped with work.

How have centres affected policy in this area?

> *Centres have been vocal in expressing their needs. The government is starting to respond, but more effort is needed on the part of the government.*

How does the monitoring process work?

> *Centres have to present the [service plan] to the licensing department so they can evaluate how the child is being helped. Centres are not usually rejected for a special needs grant, but the amount received per child is minimal — the special needs co-coordinator develops the plan with the help of the referring consultant.*

Last comment:

> *I think it's about time that children with special needs are considered as individuals and included in society. To do otherwise is unfair.*
>
> *I have to give credit to the government for their benchmark report. At least they are honest in their report and realize more help is needed in this area.*

Interview 2

Participation of Children with Disabilities in Child Care Programs

How has legislation/policy (or its absence) requiring the inclusion of children with disabilities affected practice? How do you feel about the other official's statement that "What we're trying to do is not legislate, but provide supports to facilitate inclusion"?

> *I think that that is accurate.*

Do you agree with not having legislation specific to child care inclusion?

> *Legislation might pressure the government for more money for disability. But right now we are keeping up with the demand that we hear about. Right now I think it's working pretty well.*

Are the supports for children with special needs adequate in your opinion?

> *I think it varies, particularly in the rural areas. There aren't as many rural centres. Geographically, they don't have easy access to supports (e.g. speech therapy). It's much more difficult than in the main centres.*

What could be done to improve access?

> *That's a hard one. As was pointed out in the report, the percentage of licensed care is very low, although I thought it was closer to 10 percent. Certainly having more licensed centres would improve access. Getting more licensed facilities is difficult. The other part is the whole funding for health, and having access to professionals such as speech pathologists, and early childhood psychologists. Speech is particularly key because of the early involvement with children — speech delay often being the first thing identified. These professionals aren't available in rural areas.*
>
> *Coordination of services, government departments working better together would improve access. If the child goes through education or health they may not be directed to licensed child care. Coordination, where one department knows what the other is doing is really important. The final thing that would*

> *make a difference would be training for child care staff. Just so they can feel confident in meeting the needs of children with differences. We are getting there, but that's an important piece.*

Do you feel that child care centres have had an effect on policy in this area?

> *I think they have. In the Review there was a lot of consultation with child care facilities, parents, professionals and what they said has been taken into account in what has been happening and how services are offered.*

Environmental Accommodations

How has legislation/policy affected practice?

> *The building codes are appropriate and require accessibility. If they do renovations, they have to meet current codes. Most facilities are accessible.*

Is the policy adequate in your opinion?

> *The fund is not for capital expenditures. We have had periods of time where funding was available to upgrade. Lots of facilities made use of that grant. Now we don't have funds to make a facility accessible.*
>
> *The [fund] is meant for equipment. Most of the time the funding is adequate.*

What could be done to improve physical and program accommodations?

> *It's all money. If there were money available to allow older centres to meet code requirements, most would do it. Centres don't have the money to do major renovations. There is a start-up grant for new centres, but it's not enough to build a centre. The service clubs assist with those kinds of things.*

Are the resources adequate, in your opinion, to facilitate the accommodation of children with disabilities?

> *I think so.*

Is the monitoring adequate?

> *The monitoring for building codes is done through another department.*

Parent/Family Participation

How does policy in this area affect practice?

> *They affect practice a lot. [The province] was one of the last to have licensed child care. We followed what other provinces were doing, and parent involvement was made part of the legislation. Centres are required to have boards of directors where parents are members. The involvement of parents is built into the [service plan required for children with disabilities]. We have mostly public as opposed to private child care. Private care is funded differently.*

What could be done to improve policy in this area?

> *Increased parental participation beyond what is legislated would have to come more from individual child care facilities. The centres could do more. Some do it wonderfully, while others try to keep too much control. Some of the latter could work on involving parents.*

Program Accommodations

How does policy affect practice in this area?

> *I think the regulations are good. I think they have affected the standard of care. That's the biggest piece — monitoring the program standard and providing support to the centres. I think there's room for improvement — the child/staff ratios are adequate, but lowering them would certainly improve things for children with diverse needs. A number of grants can be used for a child that needs one-on-one, but most child care centres have to meet only the minimum ratio requirements. A substantial number provide an enhanced ratio, but it's not legislated. If it were, it would improve standards across the board, and lessen the need for the [targeted special needs] grants.*

Are the program accommodations sufficient?

> *Our legislation is a minimum requirement. I would like to see a lot more than the legislated minimum. There are centres that provide wonderful supports. There are others that provide only the minimum. If it were legislated, they would have to raise their standards. Right now it varies.*

Are the monitoring mechanisms sufficient?

> *The lower the caseload is, the more monitoring the consultant can do. It's never enough, more can always be done, but relative to other provinces, caseloads aren't bad, and I think the centres feel that they get adequate monitoring. We have a minimum standard. Consultants visit centres that are doing well less frequently, while the centres that are struggling get more visits.*

In what way have child care centres affected policy in this area?

> *I'm not sure they have affected policy a lot in this particular area. They advocate more for other areas, for example, funding for basic operating costs, staffing. We don't hear a lot from them in the area of programming.*

Staffing

How does policy affect practice in this area?

> *Funding and the child/care ratios affect staffing a lot. The funding assists with staff wages. Some of the wage enhancements have improved wages for staff. Every improvement affects recruitment and retention—no studies have been done on this, but I would think that it probably has.*
>
> *Qualifications among the staff hired to work with children with special needs are quite diverse due to the lack of legislated qualification requirements. It's also difficult to get staff members to retain and upgrade their skills. If they do have training, they can get paid more in the education system or in health, so they have an incentive to leave.*

Are centres generally happy with the policy in this area?

> *No, I don't think they are. Some of them advocate for having legislated requirements. Right now it's up to each individual facility. Some of them have formed support networks where they agree that this is what we require. But they would like legislation in that area.*

What would you do to improve what is happening in this area?

> *I would like to have more programs like, [an inclusive training program for staff]. I'm a firm believer in having all staff trained in special needs in all facilities — not just having one specialist. For inclusion to be successful, you have to have the right attitudes and beliefs. For example, children have the right to participate in all activities as opposed to pull-out programs where the resource teachers take them aside to teach them particular skills and philosophy. Centre staff members need to have the training so that they have the confidence to work with all children. That is opposed to the resource teacher who takes the child out, but doesn't work within the larger framework, who doesn't meet their needs within the context of the regular program.*

How have centres affected policy in this area?

> *Centres have had a big impact. The wage enhancements were the direct result of centres advocating for that. The [specialized, inclusive] training was something else that people were asking for. The first set was really well received, and now we have extended the program across the province. It's still not enough, and we still have people who want more of it, but we will be providing more of it.*

Services

How does policy affect practice in this area?

> *It has affected practice a lot. Programs like [those directed at chidren with special needs] have assisted in better coordination of services and better understanding of services. The same goes for [a particular community-based program] that is directly funding service coordination. Those kinds of things are having a big impact on the services offered.*

Is the provision of services adequate?

> *Rural communities have used [the community-based program referred to above] to partner with other services to make them more accessible. But it still has a long way to go.*
>
> *Services are much better in the urban areas and easier to coordinate. It's hard to say whether they are adequate. For example, the mental health agency provides behaviour consultants. Because they were very successful when the program was first offered, there has been an increased demand, so service level has been reduced, and centres are asking for more. There's more now than there was before, but whether it's meeting everyone's needs, probably not.*

How have centres affected policy in this area?

> *Partnerships funded through the program have to be driven by the community. The success of these programs is completely dependent on the community and centres in those areas. The [targeted accessibility funding] is in place because of the high demand from centres for children with diverse needs.*

How does the monitoring process work?

> *There could be improvements. Agencies need to do a better job of providing the support, and providing the monitoring for that. Improving communication and coordination would improve monitoring and result in a greater level of professional involvement in the centre.*

Interview with Non-governmental Expert, Province 10

Participation of Children with Disabilities in Child Care Programs

How has legislation/policy (or its absence) requiring the inclusion of children with disabilities affected practice?

> *Because there isn't a standard, access varies from centre to centre, and in accordance with individual directors, and staff. The climate is certainly one of willingness to try to include and accommodate the children with special needs. If there's not willingness, it's usually because there is a necessity to educate and provide support more than anything else.*

Are the supports for children with special needs adequate in your opinion?

> *No. There are big gaps, largely due to lack of funding.*

What could be done to improve access?

> *We need to look at training opportunities for staff, an increase in funding to provide support (physical needs, equipment needs, ratio, etc.). Ongoing support/consultation for the staff is also needed. It exists, but it's quite stretched and resources are limited.*

Do you feel that child care centres have had an affect on policy in this area?

> *Yes. They have a lobbying voice. In partnership with other agencies, they have advocated on behalf of children with special needs.*

Environmental Accommodations

How has legislation/policy affected practice?

> *There's no legislation specific to child care centres. Most of the centres are older, so they are not covered under federal legislation. Most of the environmental issues are dealt with through the licensing process, so the new facilities would have to meet the requirements. There are grants available for upgrading, but I'm not sure how often folks access those.*

Is the policy adequate in your opinion?

> *Oh, no—I think it needs to be addressed.*

What could be done to improve physical and program accommodations?

> *There needs to be improved access. For example, some of the centres are on the second floor. There is a need for improved equipment and adaptations to the environment for the child.*

Are the resources adequate, in your opinion, to facilitate the accommodation of children with disabilities?

> *Again, it's very dependent on the individual centre. Funding is an issue. There is some funding... that is used for equipment, lowering child/staff ratios, etc., but the fund is pretty limited. There's certainly room for that to be improved.*

Is the monitoring adequate?

> *No. They have just hired some new staff—the province has acknowledged they don't have enough staff*

and they have moved to improve that. There are also a couple of projects happening, and there are some new folks that are now available to consult with centres regarding children with disabilities. There is also [a new project funded by the ministry responsible for social services, that] provides on-site consultation to ECE and child care centres.

Parent/Family Participation

How does policy in this area affect practice?

> *The [funding program] requires involvement with the [service plan]. This has had a positive effect on practice in ensuring that the parent has a say in the child's individual program, and also more broadly.*

What could be done to improve policy in this area?

> *There is still a need for training and support of staff in doing [service plans]. It would be helpful to do some training in family-centred practices.*

Program Accommodations

How does policy affect practice in this area?

> *The lack of an accreditation process needs to be addressed. Centres' needs in this area need to be addressed. A lot of what is happening is based on the individual centre, rather than on a standard. We need to ask what current practices are working, what is needed, so that we can have more consistent quality between centres and more of an equal playing field.*

Are the program accommodations sufficient?

> *It depends on the individual centre. There are some centres that are doing an excellent job of accommodating children with special needs, and others that need a lot more support.*

Are the monitoring mechanisms sufficient?

> *Not at this point. But we are hoping that some of these new projects coming on board will assist with that.*

In what way have child care centres affected policy in this area?

> *There is more lobbying from centres that have been active in this area for a number of years. The one thing that is challenging is that there is no common voice for ECE—there are vehicles, but they don't seem particularly active at this point. Not-for-profit centres have more of a network than private centres, but it is difficult to get a cohesive group/voice.*

Staffing

How does policy affect practice in this area?

> *There are recommendations from the province regarding training levels. In the [provincial child care legislation] there are general staff standards, but there are no standards with regard to children with special needs. There are centres where staff are really keen, and will take the initiative to get the appropriate training and help. Other settings may not have the resources or desire to do so.*

Are centres generally happy with the policy in this area?

> *Probably they are not. There are a whole bunch of issues around pay levels and supports—financial and having substitutes available. There are not a lot of local training opportunities, so that creates an access issue. There is no infrastructure in place to ensure that training is put into practice; support, etc. is not necessarily there.*

What would you do to improve what is happening in this area?

> *Some of the projects that have been mentioned are going in the right direction, to be able to provide consultation and support staff more regularly. There need to be more opportunities for local training that is funded. [There] is a project funded by the [ministry responsible for social services], in partnership with [a privately funded early childhood education centre]. This is a train-the-trainer program on inclusive practices. Folks will come in locally and do the training, and then provide follow-up support and consultations. It's very exciting. The workshops will start in May. The project evolved from a project sponsored by [an urban health centre specializing in services to women, children and youth].*

How have centres affected practice in this area?

> *There's been some lobbying around salary issues, also staff qualifications, and needs of staff caring for children with special needs.*

Services

How does policy affect practice in this area?

> *Although there is nothing in the policy, there is a willingness to work together at the local level. There have been projects to pilot coordinating services, and to make delivery a more formal system. There's a project for children with autism that's looking at system coordination around diagnosis and treatment. [The ministry responsible for early intervention services] currently connects with the child care system regarding inclusion. With the autism project, children are starting to get outreach health services in the child care centres (i.e. speech & language pathology, occupational therapy, etc.). Outreach is limited from [the ministry responsible for health] for children without autism — the [ministry responsible for early intervention services] still goes out into the community for all children, it doesn't matter what the diagnosis is.*
>
> *Comment Re: Autism. We are developing a two-tier system where children with autism are being prioritized and other children with special needs are not receiving the same level of service. The provincial government here indicated that they would be putting aside [funding] for autistic children in 2000. This raises issues around children receiving intensive treatment. The model here is that the child is given support in both the home and child care setting — a team goes to both settings to provide consultation — working with the staff so that therapy can be done on-site. Some centres are comfortable with that. Others don't have the space or staff available for the consultation. For the really intensive therapy (ABA) parents are choosing private programs that focus on the home environment. This is privately funded.*

Is the provision of services adequate?

> *Not at this point. I would like to see more resources available for staff and staff support. The whole system is overloaded. The wait-list for diagnosis and assessments for speech, early intervention services, etc. is from six months to a year and a half. That has an impact on what services are available for inclusion. Often the diagnosis results in being on another wait-list for service. It's a whole trickle-down. Often these children have already been identified and involved in child care, and so the centre has had to*

> *deal with a lack of support for an extended period of time, which puts pressure on the centre. Often when the child is diagnosed with a special need, the referral source in the health system will recommend a structured environment for the child such as day care, so the family will go to look for that, but have difficulty finding a suitable setting with appropriate supports. The day cares have difficulty finding appropriately trained staff to assist with the individual child and the inclusive process.*

How have centres affected policy in this area?

> *Again, it's individual lobbying if need be, on behalf of an individual child. On the one hand, some directors are very strong in supporting their staff and lobbying in general. But on the other hand, it's one more thing to do. If you have a very busy centre, and you don't have the money, enough substitute staff, etc. it's hard.*

How does the monitoring process work?

> *There's very little. Again with the new projects there will be more in place to assist with the monitoring process.*

Other Comment

> *I'm just really glad this research is being done. There's a real need to look at some of these issues in a formal way so that they can be addressed.*

APPENDIX D
Provincial Summary Tables

Summary of Scores for Provinces

Province 1	Participation of Children with Disabilities in Child Care Programs	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion	1	1	1	4	3	4	14
Legislation	4	4	1	1	1	1	12
Regulations	1	4	1	1	1	1	9
Standards and Guidelines	4	3	4	1	4	4	20
Program Requirements	4	4	4	3	3	4	22
Budgetary Measures	4	3	3	4	4	4	22
Monitoring and Evaluation Frameworks	4	3	4	4	4	4	23
Total Score for Each Column	22	22	18	18	20	22	122

Province 2	Participation of Children with Disabilities in Child Care Programs	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion	4	1	4	1	1	4	15
Legislation	4	4	4	1	1	1	15
Regulations	4	4	1	1	1	1	12
Standards and Guidelines	4	1	4	1	1	4	15
Program Requirements	4	4	4	4	4	4	24
Budgetary Measures	4	1	2	4	3	4	18
Monitoring and Evaluation Frameworks	1	1	4	4	4	4	18
Total Score for Each Column	25	16	23	16	15	22	117

Province 3	Participation of Children with Disabilities in Child Care Programs	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion	1	4	4	2	3	4	18
Legislation	1	4	4	1	1	4	15
Regulations	1	4	4	1	1	4	15
Standards and Guidelines	1	3	4	1	1	4	14
Program Requirements	3	4	4	3	4	4	22
Budgetary Measures	3	3	2	3	1	4	16
Monitoring and Evaluation Frameworks	3	4	1	4	1	4	17
Total Score for Each Column	13	26	23	15	12	28	117

Province 4	Participation of Children with Disabilities in Child Care Programs	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion	1	3	4	3	4	3	18
Legislation	1	4	1	1	1	1	9
Regulations	1	3	4	1	1	4	14
Standards and Guidelines	3	3	4	2	2	4	18
Program Requirements	3	1	4	4	1	3	16
Budgetary Measures	4	1	3	1	3	4	16
Monitoring and Evaluation Frameworks	4	4	4	1	4	4	21
Total Score for Each Column	17	19	24	13	16	23	112

Province 5	Participation of Children with Disabilities in Child Care Programs	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion	1	1	3	2	1	1	9
Legislation	1	1	1	1	1	1	6
Regulations	1	3	1	1	1	1	8
Standards and Guidelines	3	4	4	1	1	4	17
Program Requirements	4	4	4	4	2	4	22
Budgetary Measures	4	3	4	4	2	3	20
Monitoring and Evaluation Frameworks	4	4	4	4	4	4	24
Total Score for Each Column	18	20	21	17	12	18	106

Province 6	Participation of Children with Disabilities in Child Care Programs	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion	1	4	1	4	3	4	17
Legislation	1	4	1	1	1	1	9
Regulations	1	4	1	1	1	1	9
Standards and Guidelines	3	4	3	1	1	4	16
Program Requirements	4	4	4	4	1	2	19
Budgetary Measures	3	3	3	3	2	4	18
Monitoring and Evaluation Frameworks	3	4	3	3	2	4	19
Total Score for Each Column	16	27	16	17	11	20	107

Province 7	Participation of Children with Disabilities in Child Care Programs	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion	1	1	3	4	2	4	15
Legislation	1	2	1	1	1	1	7
Regulations	4	1	4	1	1	1	12
Standards and Guidelines	1	1	2	1	1	3	9
Program Requirements	4	3	4	3	4	4	22
Budgetary Measures	4	3	1	4	2	4	18
Monitoring and Evaluation Frameworks	4	3	1	4	4	3	19
Total Score for Each Column	19	14	16	18	15	20	102

Province 8	Participation of Children with Disabilities in Child Care Programs	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion	1	2	4	3	2	2	14
Legislation	1	4	4	1	2	1	13
Regulations	1	4	1	1	1	4	12
Standards and Guidelines	1	4	4	1	1	2	13
Program Requirements	3	4	3	3	2	3	18
Budgetary Measures	3	3	2	2	2	3	15
Monitoring and Evaluation Frameworks	3	4	2	2	3	2	16
Total Score for Each Column	13	25	20	13	13	17	101

Province 9	Participation of Children with Disabilities in Child Care Programs	Environmental Accommodations	Parent/Family Participation	Program Accommodations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion	1	3	4	4	1	3	16
Legislation	1	4	1	1	1	1	9
Regulations	1	1	1	1	1	1	6
Standards and Guidelines	3	1	3	1	1	1	10
Program Requirements	2	4	3	4	1	3	17
Budgetary Measures	3	4	3	1	2	2	15
Monitoring and Evaluation Frameworks	3	4	1	1	1	1	11
Total Score for Each Column	14	21	16	13	8	12	84

Province 10	Participation of Children with Disabilities in Child Care Programs	Environ-mental Accommo-dations	Parent/Family Participation	Program Accommo-dations	Staffing	Services	Total Score For Each Row
Policy/Program Philosophy re: Inclusion	1	1	3	2	2	2	11
Legislation	1	1	1	1	1	1	6
Regulations	1	1	1	1	1	1	6
Standards and Guidelines	2	1	3	1	1	3	11
Program Requirements	2	3	3	2	4	3	17
Budgetary Measures	2	2	2	3	2	2	13
Monitoring and Evaluation Frameworks	2	4	2	1	1	2	12
Total Score for Each Column	11	13	15	11	12	14	76

Provincial Rankings by Program and Policy Elements

Participation of Children with Disabiliies in Child Care Programs	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	2	22	79%	Adequate to good policy environment in this area [68% - 87%]
Province 2	1	25	89%	Excellent policy environment in this area [68% - 87%]
Province 3	8	13	46%	Unacceptable policy environment in this area [less than 50%]
Province 4	5	17	61%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 5	4	18	64%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 6	6	16	57%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 7	3	19	68%	Adequate to good policy environment in this area [68% - 87%]
Province 8	8	13	46%	Unacceptable policy environment in this area [less than 50%]
Province 9	7	14	50%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 10	9	11	39%	Unacceptable policy environment in this area [less than 50%]
Maximum Score		28		

Environmental Accommodations	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	4	22	79%	Adequate to good policy environment in this area [68% - 87%]
Province 2	8	16	57%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 3	2	26	93%	Excellent policy environment in this area [higher than 87%]
Province 4	7	19	68%	Adequate to good policy environment in this area [68% - 87%]
Province 5	6	20	71%	Adequate to good policy environment in this area [68% - 87%]
Province 6	1	27	96%	Excellent policy environment in this area [higher than 87%]
Province 7	9	14	50%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 8	3	25	89%	Excellent policy environment in this area [higher than 87%]
Province 9	5	21	75%	Adequate to good policy environment in this area [68% - 87%]
Province 10	10	13	46%	Unacceptable policy environment in this area [less than 50%]
Maximum Score		28		

Parent/ Family Participation	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	5	18	64%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 2	2	23	82%	Adequate to good policy environment in this area [68% - 87%]
Province 3	2	23	82%	Adequate to good policy environment in this area [68% - 87%]
Province 4	1	24	86%	Adequate to good policy environment in this area [68% - 87%]
Province 5	3	21	75%	Adequate to good policy environment in this area [68% - 87%]
Province 6	6	16	57%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 7	6	16	57%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 8	4	20	71%	Adequate to good policy environment in this area [68% - 87%]
Province 9	6	16	57%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 10	7	15	54%	Poor to barely adequate policy environment in this area [50% - 67%]
Maximum Score		28		

Program Accommo-dations	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	1	18	64%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 2	3	16	57%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 3	4	15	54%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 4	5	13	46%	Unacceptable policy environment in this area [less than 50%]
Province 5	2	17	61%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 6	2	17	61%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 7	1	18	64%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 8	5	13	46%	Unacceptable policy environment in this area [less than 50%]
Province 9	5	13	46%	Unacceptable policy environment in this area [less than 50%]
Province 10	6	11	39%	Unacceptable policy environment in this area [less than 50%]
Maximum Score		28		

Staffing	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	1	20	71%	Adequate to good policy environment in this area [68% - 87%]
Province 2	3	15	54%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 3	5	12	43%	Unacceptable policy environment in this area [less than 50%]
Province 4	2	16	57%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 5	5	12	43%	Unacceptable policy environment in this area [less than 50%]
Province 6	6	11	39%	Unacceptable policy environment in this area [less than 50%]
Province 7	3	15	54%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 8	4	13	46%	Unacceptable policy environment in this area [less than 50%]
Province 9	7	8	29%	Unacceptable policy environment in this area [less than 50%]
Province 10	5	12	43%	Unacceptable policy environment in this area [less than 50%]
Maximum Score		28		

Services	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	3	22	79%	Adequate to good policy environment in this area [68% - 87%]
Province 2	3	22	79%	Adequate to good policy environment in this area [68% - 87%]
Province 3	1	28	100%	Excellent policy environment in this area [higher than 87%]
Province 4	2	23	82%	Adequate to good policy environment in this area [68% - 87%]
Province 5	5	18	64%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 6	4	20	71%	Adequate to good policy environment in this area [68% - 87%]
Province 7	4	20	71%	Adequate to good policy environment in this area [68% - 87%]
Province 8	6	17	61%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 9	8	12	43%	Unacceptable policy environment in this area [less than 50%]
Province 10	7	14	50%	Poor to barely adequate policy environment in this area [50% - 67%]
Maximum Score		28		

Policy/Program Philosophy re: Inclusion	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	5	14	58%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 2	4	15	63%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 3	1	18	75%	Adequate to good policy environment in this area [68% - 87%]
Province 4	1	18	75%	Adequate to good policy environment in this area [68% - 87%]
Province 5	7	9	38%	Unacceptable policy environment in this area [less than 50%]
Province 6	2	17	71%	Adequate to good policy environment in this area [68% - 87%]
Province 7	4	15	63%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 8	5	14	58%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 9	3	16	67%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 10	6	11	46%	Unacceptable policy environment in this area [less than 50%]
Maximum Score		24		

Legislation	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	3	12	50%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 2	1	15	63%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 3	1	15	63%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 4	4	9	38%	Unacceptable policy environment in this area [less than 50%]
Province 5	6	6	25%	Unacceptable policy environment in this area [less than 50%]
Province 6	4	9	38%	Unacceptable policy environment in this area [less than 50%]
Province 7	5	7	29%	Unacceptable policy environment in this area [less than 50%]
Province 8	2	13	54%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 9	4	9	38%	Unacceptable policy environment in this area [less than 50%]
Province 10	6	6	25%	Unacceptable policy environment in this area [less than 50%]
Maximum Score		24		

Regulations	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	4	9	38%	Unacceptable policy environment in this area [less than 50%]
Province 2	3	12	50%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 3	1	15	63%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 4	2	14	58%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 5	5	8	33%	Unacceptable policy environment in this area [less than 50%]
Province 6	4	9	38%	Unacceptable policy environment in this area [less than 50%]
Province 7	3	12	50%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 8	3	12	50%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 9	6	6	25%	Unacceptable policy environment in this area [less than 50%]
Province 10	6	6	25%	Unacceptable policy environment in this area [less than 50%]
Maximum Score		24		

Standards and Guidelines	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	1	20	83%	Adequate to good policy environment in this area [68% - 87%]
Province 2	5	15	63%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 3	6	14	58%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 4	2	18	75%	Adequate to good policy environment in this area [68% - 87%]
Province 5	3	17	71%	Adequate to good policy environment in this area [68% - 87%]
Province 6	4	16	67%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 7	10	9	38%	Unacceptable policy environment in this area [less than 50%]
Province 8	7	13	54%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 9	9	10	42%	Unacceptable policy environment in this area [less than 50%]
Province 10	8	11	46%	Unacceptable policy environment in this area [less than 50%]
Maximum Score		24		

Program Requirements	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	2	22	92%	Excellent policy environment in this area [higher than 87%]
Province 2	1	24	100%	Excellent policy environment in this area [higher than 87%]
Province 3	2	22	92%	Excellent policy environment in this area [higher than 87%]
Province 4	6	16	67%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 5	2	22	92%	Excellent policy environment in this area [higher than 87%]
Province 6	3	19	79%	Adequate to good policy environment in this area [68% - 87%]
Province 7	2	22	92%	Excellent policy environment in this area [higher than 87%]
Province 8	4	18	75%	Adequate to good policy environment in this area [68% - 87%]
Province 9	5	17	71%	Adequate to good policy environment in this area [68% - 87%]
Province 10	5	17	71%	Adequate to good policy environment in this area [68% - 87%]
Maximum Score		24		

Budgetary Measures	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	1	21	88%	Excellent policy environment in this area [higher than 87%]
Province 2	3	18	75%	Adequate to good policy environment in this area [68% - 87%]
Province 3	4	16	67%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 4	4	16	67%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 5	2	20	83%	Adequate to good policy environment in this area [68% - 87%]
Province 6	3	18	75%	Adequate to good policy environment in this area [68% - 87%]
Province 7	3	18	75%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 8	5	15	63%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 9	5	15	63%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 10	6	13	54%	Poor to barely adequate policy environment in this area [50% - 67%]
Maximum Score		24		

Monitoring and Evaluation Frameworks	**Overall Ranking**	**Score**	**% of Maximum Score**	**Scoring Guide**
Province 1	2	23	96%	Excellent policy environment in this area [higher than 87%]
Province 2	5	18	75%	Adequate to good policy environment in this area [68% - 87%]
Province 3	6	17	71%	Adequate to good policy environment in this area [68% - 87%]
Province 4	3	21	88%	Excellent policy environment in this area [higher than 87%]
Province 5	1	24	100%	Excellent policy environment in this area [higher than 87%]
Province 6	4	19	79%	Adequate to good policy environment in this area [68% - 87%]
Province 7	4	19	79%	Adequate to good policy environment in this area [68% - 87%]
Province 8	7	16	67%	Poor to barely adequate policy environment in this area [50% - 67%]
Province 9	9	11	46%	Unacceptable policy environment in this area [less than 50%]
Province 10	8	12	50%	Poor to barely adequate policy environment in this area [50% - 67%]
Maximum Score		24		

Scores for Policy Environments by Program Element and Province

Participation of Children with Disabilities in Child Care Programs	Philosophy	Legislation	Regulations	Standards and Guidelines	Program Requirements	Budgetary Measures	Monitoring Frameworks	% of Max. Score
Province 1	1	4	1	4	4	4	4	79%
Province 2	4	4	4	4	4	4	1	89%
Province 3	1	1	1	1	3	3	3	46%
Province 4	1	1	1	3	3	4	4	61%
Province 5	1	1	1	3	4	4	4	64%
Province 6	1	1	1	3	4	3	3	57%
Province 7	1	1	4	1	4	4	4	68%
Province 8	1	1	1	1	3	3	3	46%
Province 9	1	1	1	3	2	3	3	50%
Province 10	1	1	1	2	2	2	2	39%

Environmental Accommodations	Philosophy	Legislation	Regulations	Standards and Guidelines	Program Requirements	Budgetary Measures	Monitoring Frameworks	% of Max. Score
Province 1	1	4	4	3	4	3	3	79%
Province 2	1	4	4	1	4	1	1	57%
Province 3	4	4	4	3	4	3	4	93%
Province 4	3	4	3	3	1	1	4	68%
Province 5	1	1	3	4	4	3	4	71%
Province 6	4	4	4	4	4	3	4	96%
Province 7	1	2	1	1	3	3	3	50%
Province 8	2	4	4	4	4	3	4	89%
Province 9	3	4	1	1	4	4	4	75%
Province 10	1	1	1	1	3	2	4	46%

Parent/Family Participation	**Philosophy**	**Legislation**	**Regulations**	**Standards and Guidelines**	**Program Requirements**	**Budgetary Measures**	**Monitoring Frameworks**	**% of Max. Score**
Province 1	1	1	1	4	4	3	4	64%
Province 2	4	4	1	4	4	2	4	82%
Province 3	4	4	4	4	4	2	1	82%
Province 4	4	1	4	4	4	3	4	86%
Province 5	3	1	1	4	4	4	4	75%
Province 6	1	1	1	3	4	3	3	57%
Province 7	3	1	4	2	4	1	1	57%
Province 8	4	4	1	4	3	2	2	71%
Province 9	4	1	1	3	3	3	1	57%
Province 10	3	1	1	3	3	2	2	54%

Program Accommodations	**Philosophy**	**Legislation**	**Regulations**	**Standards and Guidelines**	**Program Requirements**	**Budgetary Measures**	**Monitoring Frameworks**	**% of Max. Score**
Province 1	4	1	1	1	3	4	4	64%
Province 2	1	1	1	1	4	4	4	57%
Province 3	2	1	1	1	3	3	4	54%
Province 4	3	1	1	2	4	1	1	46%
Province 5	2	1	1	1	4	4	4	61%
Province 6	4	1	1	1	4	3	3	61%
Province 7	4	1	1	1	3	4	4	64%
Province 8	3	1	1	1	3	2	2	46%
Province 9	4	1	1	1	4	1	1	46%
Province 10	2	1	1	1	2	3	1	39%

Staffing	**Philosophy**	**Legislation**	**Regulations**	**Standards and Guidelines**	**Program Requirements**	**Budgetary Measures**	**Monitoring Frameworks**	**% of Max. Score**
Province 1	3	1	1	4	3	4	4	71%
Province 2	1	1	1	1	4	3	4	54%
Province 3	3	1	1	1	4	1	1	43%
Province 4	4	1	1	2	1	3	4	57%
Province 5	1	1	1	1	2	2	4	43%
Province 6	3	1	1	1	1	2	2	39%
Province 7	2	1	1	1	4	2	4	54%
Province 8	2	2	1	1	2	2	3	46%
Province 9	1	1	1	1	1	2	1	29%
Province 10	2	1	1	1	4	2	1	43%

Services	**Philosophy**	**Legislation**	**Regulations**	**Standards and Guidelines**	**Program Requirements**	**Budgetary Measures**	**Monitoring Frameworks**	**% of Max. Score**
Province 1	4	1	1	4	4	4	4	79%
Province 2	4	1	1	4	4	4	4	79%
Province 3	4	4	4	4	4	4	4	100%
Province 4	3	1	4	4	3	4	4	82%
Province 5	1	1	1	4	4	3	4	64%
Province 6	4	1	1	4	2	4	4	71%
Province 7	4	1	1	3	4	4	3	71%
Province 8	2	1	4	2	3	3	2	61%
Province 9	3	1	1	1	3	2	1	43%
Province 10	2	1	1	3	3	2	2	50%

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